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QUO VADIS?

THE Alban Hills, the Campagna and the Appian Way must all look very much today as they looked twenty centuries ago, when, tradition tells us, Peter put the above memorable question to Christ. Every year students face it from their class-mates, their friends, and the world. The latter says bluntly, "We have bred you, fed you, taught you. What return can you make?" And the students, trying to reply, read magazine articles, attend vocational conferences, consult their class advisers, possibly flip coins. Few see a war-torn, heart-sick world, turning wearily from ancient shibboleths, waiting, wondering, expectant.

Nursing is a field for women, unparalleled in its opportunities for personal service. Still in its pioneer stages, it offers a great deal to the young student; much more than she frequently sees. "I was sick and ye visited me" is capable of many interpretations. Edith Cavell, organising a training school, teaching the care of the sick to young Belgian women, risking her life, finally giving it for her country, was a nurse; the unknown visiting nurse whose steady nerve and trained intelligence recently saved the life of a young mother in an obscure home, was another. The graduates of a famous school, banqueting their Chief, whose forty years of service had helped to put nursing knowledge and skill in every corner of the world, were nurses honoring a nurse.

A young minister once stood by the bedside of a dying patient. He had taken honors in Greek, Hebrew, and other wise studies and his church was considered uncommonly fortunate. As he was ushered into the sick-room, the eyes of the old woman turned towards him longingly. Her lips said faintly, "It is all very wonderful but—What is your learning to me?" Sick people approach our hospitals very much in this attitude of mind. The million dollar private pavilions, the noisy X-ray rooms, the rows upon rows of gleaming, terrible instruments, the endless corridors, the seemingly hopeless efficiency of the busy workers, physicians, nurses or what-not, appall and oppress

them. Like the little old woman, they ask inarticulately, "What is all this science to me? Can it cure my pain? Will it send me back to my job and my family better, stronger?"

Women who enter nursing today, sincerely, earnestly, face scores of these helpless citizens. The field offers so much more than a means of livelihood or a professional promotion. The graduate nurse by her personal service or by her teaching of others, may help restore health, decrease suffering, give life more abundantly to thousands of her fellow-men. What better response can American girls, typified by their sisters of the frontispiece, make to the world's demand, "Whither goest thou?" than to say, "In their steps"?

Opportunity

JUNE, to us, is the month of marching feet, and the rhythm of the march is joyous. Out of the high schools of our Main Streets and our cities, out of the colleges and universities a resistless army pours, and we listen to the throb and beat of the march of the youth of the country toward life's first cross roads. The sound of jazz is dominant, but underneath is a deeper, steadier strain. On they come, eager, challenging, purposeful. Beat, beat, go the marching feet, now on this turn, now on that, for the marchers are searching, searching for the road which leads to opportunity.

Each one is seeking self-fulfillment. Many will dally in primrose paths, many others know their heart's desire and go marching unswervingly in search of it. Many more will halt at the first cross roads. These will be lost indeed, if, at the crossing they find no guides. Thousands of wistful, yearning and impetuous souls need wise counsel there. Are *you* prepared, graduate nurses, to tell of the opportunities that await those who join our ranks? Are you eager to show them a way to self fulfillment through social service of a high order?

This is *our* opportunity. Our army is mighty but it needs recruits. Can you guide some of these marching feet into our ranks? Can you demonstrate the opportunities in our profession that await those who, possessing sound bodies and alert minds, possess also a desire to serve? More than your country is calling you now to service! Civilization itself is calling to the thinking women of the world to march steadily, courageously, and with clear vision. Nurses have an unparalleled opportunity to assist in averting the moral catastrophe that threatens the world. We must keep our own vision and objective clear and in so doing guide others into a life of satisfying usefulness,—a life which will help to give health,—mental, moral and physical,—to the peoples of the world. Make the most of June. Make it truly a month of opportunity.

Some Facts About Nursing

From home and hospital, from city and hamlet, from our own country and from foreign lands comes the demand for more and yet more persons properly qualified to play a part in the great movement to obtain skilled care for all who fall sick and better health for all peoples. The figures of the 1920 census are not satisfying although they are impressive, as we had, at the time the census was taken, 149,128 trained nurses (of whom 5,464 were men) and 151,996 persons without training engaged in the care of the sick.

In 1919-20 there were 54,953 students in training and 14,980 graduates in the hospitals conducting these schools. The hospitals nursed by these schools were caring for 252,823 patients daily. There are now about 11,000 nurses engaged in public health nursing, caring for other thousands who are ill, and teaching health. The number of patients cared for by private duty nurses is difficult to estimate. The demand for nurses who can administer or teach in our schools and who are prepared for public health work is constantly increasing. The demand for more and better care for patients in moderate circumstances is imperiously insistent and is a problem that can only be met by coöperative study and effort.

The Director of one of our great schools states that the alumnae of her school are occupying fifty-five different types of nursing positions,—the classification being made under the four heads, administrative, educational, private duty, and public health. Geographically it includes all types of nurses; from those working in the narrow confines of laboratories, those in offices and institutions, those in the homes as private duty nurses and others in the district homes, to those in the far places of the earth in Red Cross work or the many mission fields.

The Placement Bureau at National Headquarters is constantly concerned with finding round pegs to fit the round holes and square pegs to fit the square holes that hospitals are constantly requiring to be filled and that nurses are desirous of filling. Last year hundreds of positions were so filled. They ranged all the way from general duty to important executive posts. Since this is the end of the school year, letters have been pouring into Headquarters at the rate of four or five a day asking for nurses prepared to teach or to direct schools for nurses. The Vocational Department of the National Organization for Public Health Nursing is eager to assist organizations in need of nurses and nurses who are ready for public health positions. Their slogan is "the right nurse in the right field."

New graduates will find the door of opportunity widely open and a warm welcome awaiting them. They are reminded that the

JOURNAL'S Official Directory is an index to reliable sources of information. The Secretaries at National Headquarters, 370 Seventh Avenue, New York, in addition to assisting the graduates who are seeking positions will gladly serve the students who are looking forward to the Promised Land of graduate work, and the potential students who are thoughtfully making a comparative study of schools.

NEWS

ONLY the unusual is news. This is the basic principle upon which all journalism rests, and it is the acid test of the work of all reporters. How resentful we are when an unsavory story about a nurse occupies space on a front page! We quite forget that it is there *because* it is unusual; that the word nurse is used over and over again for its news value because nurses as a rule are good citizens who rarely violate the code. We experience a similar reaction when a nurse bursts into print to relate the dreadful hardships of her training; again forgetting that it is the unusual that has news value and that the training in our well conducted schools is not an endurance test. It was news when a courageous nurse made a twenty-three mile trip on skis through a blizzard to carry food and clothing to a destitute family, because it was an extraordinary feat for any woman to perform. It was not real news when in January, their busiest month in the whole year, fifty private duty nurses volunteered for clinic duty such as is described on page 710 of this Journal. It is taken for granted that the various groups of nurses will coöperate with each other in time of unusual need or in developing a comprehensive programme. We have rightly taught the world to expect that sort of thing of us.

It is not news that thousands of nurses are quietly going on day by day; assisting in the poignant dramas of birth and death; helping the sick back to health and the handicapped to make new adjustments to life; teaching health habits to children, hygiene to the mothers, and all this to all creeds, all nationalities, the high and the low, the rich and the poor. No newspaper would think of printing an article on these things because they are the usual thing. It is news when it is said that some of us profiteer. Again it is the unusual that is given space and little mention is made of the modest incomes of those whose greatest satisfaction is in work well done. There is much truth in the adage, "No news is good news." It would be strange indeed if there were not occasional real news,—good or bad, of the thousands of nurses in this country, but the best news, like that of the adage, is that which never gets into print.

Contributors

THIS *Journal* carries articles by five writers whose viewpoints are essentially those of the rising generation of nurses. They are Dixie L. Davis, a first year student in the School of Christian Church Hospital, Kansas City; F. Dunne, a Senior student in the School of Hahnemann Hospital, Chicago. Katherine Emma Peirce, a "Vassar Camper," graduated in 1920 from Massachusetts General Hospital and engaged in public health work upon completion of a post-graduate course at Simmons College; Emilie G. Sargent, graduated from Mt. Sinai School for Nurses, New York, in 1920 and is now assistant superintendent of the Visiting Nurse Association of Detroit; Ethel Hyde, graduated in 1920 from Johns Hopkins School for Nurses, and is a head nurse at the Evanston Hospital, Evanston, Illinois.

The other contributors are all women who have won distinction in various fields of nursing. We are particularly indebted to Edna L. Foley, Director of the Visiting Nurse Association of Chicago, for the foreword, "Quo Vadis," and to Miss Riddle, whose "Contrast" is based on thirty-five years of active hospital service.

Exhibits at Seattle

KNOWING where to get what you want, when you want it, is a test of education. It applies equally to the buyer who is concerned with the cost and quality of materials and equipment, to the instructor who must constantly verify and augment her store of information, and to the individual whose needs are both intellectual and material.

The exhibits for the Seattle Convention are planned with educational values in mind. The professional exhibit will be the most interesting we have ever had and, for the first time, we are to have a "commercial" exhibit. Those who are responsible for the arrangements believe that the exhibits will add much to the worth of the Convention.

The meetings will be absorbing; do not allow them to put the exhibits out of your mind. Make definite plans for visiting the booths. You will want to mark your programme in advance in order that you may not overlook the papers and discussions that are of particular interest to you. Mark the exhibits also and set a time for seeing them. No human being can see and do all the interesting things at one of our national conventions. Learn from the experienced; they make discriminating plans early and they learn much from exhibits.

Our Book Reviews

THOSE who seek guidance in the reviews of literary journals are not infrequently reminded of the saying, "Who shall decide when doctors disagree?" for what one reviewer praises to the skies another may condemn to the lowest depths. An extreme instance that comes to mind is that of Dos Passos "Three Soldiers." The *Journal* editors realize that it is impossible to secure reviews that will at one and the same time meet all needs and be in accord with all subsequent judgments. They believe, however, that the present policy of having reviews prepared by specialists in the various fields insures the publication of reviews that merit thoughtful attention on the part of those who seek guidance in adding to their own libraries and of those who are in a position to guide the professional reading of others.

The generous coöperation of busy nurses, doctors and other health workers in helping us build up this department is one of the heart-warming things that brightens our days. This month the reviews are of books that should interest every nurse, no matter what her specialty, for they deal competently and inspiringly with fundamentals —one with the mystery of life itself, another with the principles of nursing. The reviewers, like the authors, need no commendation from the editors.

Choice of Schools

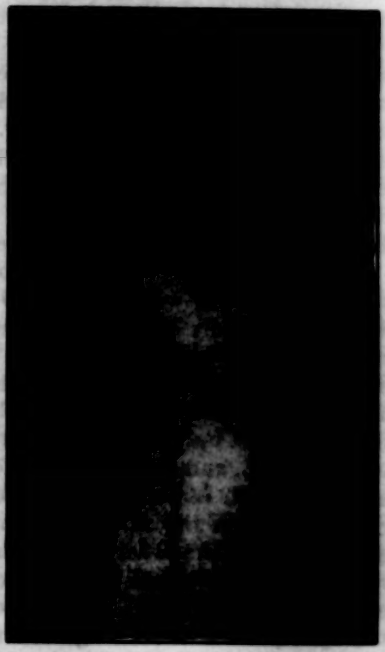
PROSPECTIVE nurse students should investigate our schools with the same painstaking thoroughness they would give to selecting a college. No locality has a monopoly of the good schools and there are many sources of information. In addition to National Nursing Headquarters, 370 Seventh Avenue, New York City, and the various State Boards, we would call attention to the Councils of Nursing Education which are prepared to serve large local areas. The Eastern Council is located at 24 Fifth Avenue, New York City; the Central Council at 116 South Michigan Avenue, Chicago, Illinois; while the Council of Southeastern Pennsylvania's address is 34 South 17th Street, Philadelphia, Pennsylvania.

All will give candid, unbiased information to those seeking information as to the criteria by which a school for nurses should be judged and all have lists of recognized schools for distribution.

THEN AND NOW—A CONTRAST

By Mary M. Riddle, R.N.
Newton Centre, Mass.

THE evolution of nursing, or the progress made by the nursing profession during the last thirty-five years, is most marked when one considers conditions as they existed in the days so long ago and compares them with the present time. Any nurse belonging to the earlier period who saw the moving picture entitled "In the Footsteps of Florence Nightingale" must have been impressed with



Type of uniform worn at the time referred to in this article. The oil lamp was the only night light. Caps were sometimes set on fire. The photograph was taken of Mary L. Keith in 1886.

the fact that the depicted arrival of the young woman presenting herself to the nurse school of the modern hospital was almost all that seemed typical of her own experience, even though the young woman of the picture, with her businesslike appearance and air of assurance, presented some contrasts to the more timid, but more mature woman entering upon her nursing career in the late eighties or early nineties.

She may have recalled her own arrival and how she was shown into a cosy reception room in the very comfortable nurses' home and heard the announcement made through the telephone, "The new

probationer has come." The announcement gave the new arrival a pang and fixed within her a purpose always and forever to avoid, if possible, the use of the title she had just heard applied to herself. She was, however, reassured by the sight of the sweet-faced superintendent of nurses who appeared almost immediately to welcome the newcomer, inquire concerning her journey, her need of refreshment, to show her to her room, ascertain its fitness for occupancy, and introduce her to a student nurse taking her hour off in a near-by room. All this gave to the young woman a sense of safety and security. But she was the only arrival for three weeks; there was no big class coming in with her, as there would be today, no one with whom she could affiliate or compare notes. She had to bear the brunt of the newness alone.

The next morning she was assigned to her place in the ward, where she was expected to do her share of the work without witnessing any demonstration of it as it would be given today.

"Can't you make that bed look better?" fell upon her ears like a knell, said bed being occupied by a man with a fractured femur which was protected from the bed clothing by a cradle.

"Now take your basin and dust the south side of the ward!" How to dust with a basin, when she had been accustomed to using a cloth, and which was the south side of the ward, were two difficult questions for her to decide, but the timely explanation of one of the men patients made it possible for her to proceed with some degree of success. Her home training required such dusting that no fleck of dust could be discovered immediately afterward. Naturally, she aspired to have the same results in her first hospital dusting—wiping off every part of the bed frame, chairs, etc., and every slat of the inside blinds, when a near-by patient said, "Oh, come on, you'll soon have to get over that!" But she pressed on in the same way until told by the head nurse to "Hurry up" and get the ordered fomentation on Number 15's chest. Fortunately she could locate the man's chest, but what and where was the fomentation? Ashamed of her ignorance and unwilling to be instructed by a patient so soon again, she wandered to the diet kitchen, where the ward maid noticed her distress and inquired into it. Upon being told of her dilemma the maid said: "Sure, we can do that; be after gettin' your fomentation flannel from the box behind the door in the linen closet and bring it here and I'll show ye."

She was as good as her word and no fomentation ever looked better to that young woman, either as probationer or as graduate nurse, though some must have been better.

The new probationer's first half day was soon passed and on her

way to the dining room at noon she concluded that the training might be excellent, but evidently the school's instructors were absent, and she wondered if there were any electives. Yet that hospital and its nurse school was one of the best in the land and the hospital ward was so well conducted that it remains to this day a shining example in the mind of the then probationer.

Compare this procedure with that of the present day, when the probation class members on the first day after admission are assembled, are carefully taught from day to day, first the simpler work, which is gradually increased and developed until the young women become acquainted with the routine work, as well as with much that is more complex, and are adjudged sufficiently expert to work under supervision in the wards and go on gaining in knowledge and experience until the time when they no longer require the close supervision and are declared fit for graduation.

Since such a hard physical strain was put upon the young nurse, she required great physical strength and endurance, and the training schools were compelled to admit only the able-bodied to their classes, throwing into discard all who were under weight or undersized; surely there must have been much good nursing material, even genius, lost to the sick world.

Routine work went on in the wards, each day being spent much as was the probationer's first half day. Night duty followed in course of time and consisted of eleven hours of service for a period of two months. As much consideration as possible was shown the night nurses and they were not allowed a second term of night duty without an intervening vacation and were given five months of it during the course of two years.

The allotted time for rest and recreation during the day was one hour, which every student nurse was obliged to take; nothing short of a fire in the hospital, or the nurse's own inability to get off duty, would excuse her to the authorities for not doing so. It was as much of a misdemeanor for her to be on duty when she should be off, as it was to fail to be on duty at the appointed time.

Unlike many schools at that time, the particular school in which this probationer found herself gave much thought to the arrangement of the nurses' vacations. Students were given, as nearly as possible, their choice of time and they were always given sufficient notice to make suitable arrangements for spending it.

In common with those of other schools of the time, the nurses were retarded in their progress by the prevailing custom of keeping them too long in those wards, or at those posts, where their most excellent service was given, thereby preventing the rounded experience

and usefulness of the course of instruction to which they were entitled and making the hospital the only gainer.

If the instruction given in the wards was meagre and would better be called experience, class-room instruction was likewise limited, there being but one class recitation and one lecture per week for each nurse. They were, however, always attended, no work nor ward emergency furnished adequate excuse for absence from class, but were provided for in some other way. No other time for rest or recreation was given on class or lecture days.

Nurses' food in those days was provided in a more or less routine manner, but was ample, though simple. Nowhere could better staple articles of food have been found, either then or now. The chief complaint heard was that the exact menu was always known, each day in the week had its own, and it never varied. It was exceedingly tiresome to have one's Tuesday dinner always the same, or to know that Friday's dessert would be a square piece of apple pie. If it could occasionally have been oblong or triangular, or such a piece as would naturally be cut from a round pie, it might have been not only endured but enjoyed. When the mother of one of the nurses inquired regarding her preferences in food during an approaching vacation she was told that anything except stewed prunes and square pie would be appreciated.

There was very little attention paid to any social activities for the nurses. The Christmas season always brought a party, but the pupils were so unused to meeting each other in a truly social way that they hardly knew what was expected of them nor how to conduct themselves, and while they might have preferred to absent themselves, their loyalty and class spirit would not permit them to do so. The St. Barnabas Guild did much in drawing the nurses together and for this alone would have had their gratitude, even though the principles for which the Guild stands have always been appreciated. It was certainly a great event to attend a meeting of the Guild and remain for refreshments and a social hour, the latter possibly ending in a dance, and the refreshments being the much loved ice cream and cake.

Graduation was not celebrated as such. When a nurse had passed her examinations and had completed her time she was called to the office of the superintendent of nurses and handed her diploma. She doubtless heard a few words of appreciation from her superintendent and she was then allowed to go her own way. At that time there were no alumnae associations or other organizations for her to join. She was therefore very decidedly dependent wholly upon herself. Opportunities in the field of nursing were not many and

she had little from which to choose. Most of the large cities had district or visiting nursing organizations, but the average nurse knew nothing about them at the time of her graduation. Industrial nursing, Red Cross work for nurses, etc., had not come into existence. The only occupation open to her was private duty nursing and, as the demand was not quite equal to the supply in this line of work, she took a room near the hospital and prepared to await her turn for a call to a case. There was little special nursing done in the hospital and she could not, therefore, hope for any work from that source.

She was wholly dependent upon the nurses' registry connected with the medical library of the city, there being no registries conducted by nurses. The registry was autocratic and had no particular interest in the nurse, outside of the fee she paid for membership in the registry and the fee she was supposed to collect from her patient and return to the registry for sending her upon the case.

This system was always more or less obnoxious to the nurses in general and finally they broke away from the registry in the medical library, completed an organization of their own to maintain one, and have been free ever since. It was a great step for the nurses to take and it could not be taken without due regard for the possible consequences. So dependent had they been, so untried was the new organization, and so threatening was the old, it was finally decided that at the beginning none of the new organization's officers should be private duty nurses, but must be those in institutional and other positions who had nothing to lose and therefore could survive a boycott if one came.

The new organization proved a success, there could be no boycott and the incident has proved one of the very best arguments for organization. Incidentally it might be said that the Medical Library Association which maintained the registry was able to build a fine new home for its library largely through the efforts of the nurses in collecting fees.

While the course of study and general educational development of nurses through their schools of nursing were limited, thirty-five or forty years ago, it must not be concluded that the nursing care of the sick was likewise limited. Through the large amount of practical work the nurses acquired great deftness of hand, while the opportunities for observation and the cultivation of a sound discriminating judgment resulted in a knowledge of the condition of patients not always enjoyed by those of the present day. The patient was the unit of consideration in all hospital schools, and this principle formed the chief topic in all the instruction on ethics.

The superintendents and directors of the schools were most

exemplary in their devotion to duty as they understood it. Their routine work was quite as absorbing as that of their students and they had neither time nor strength to originate new methods or new courses for their students. Their devotion and unselfishness were a constant inspiration to their nurses which in many instances continues to this day.

They finally broke away from traditions to form nursing organizations, which marked the dawn of a new progress whose light has continued to shine steadily, showing the way, until today schools for nurses are what they are, and all nurses may be excused for having pride in them, at the same time that they are impelled to respect the past and have faith in the future.

OUR JUNIOR COLLEGE PLAYLET

By Dixie L. Davis
Kansas City, Missouri

DEAR Erstwhile Probationers Everywhere: The members of the Probation and Junior classes (why not "Freshmen" instead of Probationers, I wonder?) from all the hospitals in Kansas City, Missouri, have just completed a most delightful and highly instructive term at Junior College, Kansas City, and it has occurred to me that others who have just set forth on their journey toward the coveted R.N. might be interested in our preliminary steps.

The courses at Junior College consisted of theoretical and practical work in Anatomy, Chemistry, Bacteriology, Drugs and Solutions, Dietetics, History of Nursing and Practical Nursing. But it is of our "playlet" or demonstration in Practical Nursing given in the auditorium at Junior College that I want to tell you. Heretofore, the supervisors of the various hospitals have watched us, as individuals, give temperature sponges, make beds with box corners, etc. This year we wanted something different, so at our instructor's suggestion we gave a little play outlining a day in the hospital; each hospital was to have 15 minutes and each group of nurses to wear their own uniform.

Mercy Hospital and Christian Church Hospital opened: voices were heard at morning prayer, then the Head Nurse appeared and listened to the night report and assigned daily duties. Four nurses took the part of patients,—one a "mental" patient who was constantly interrupting the routine; one as a pre-operative, scared (not wholly simulated) and failing to see the necessity for the administration of

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Participants in the Junior College Playlet: 1. Probation uniform of Bethany Hospital. 2. Student nurse uniform, Research Hospital. 3. Graduate nurse uniform, St. Luke's Hospital.

a hypodermic. A post-operative, up on back rest; and a convalescent up in a chair, completed the cases represented.

Each scene called for the presence of one or two internes or doctors, so preceding the play, each hospital had conducted a temporary tailoring establishment and had outfitted two of their nurses as internes!

The second scene showed Missouri Valley, Wilcrest, Trinity Lutheran (Swedish) Hospital nurses in charge. Christian's pre-operative case came back after an appendectomy; another patient—a tonsillectomy, who was as large as the nurse was small, insisted "I want my arms out from under the cover" and "I gotta have a drink of water." The actual demonstrations were making the ether bed and taking the operatives from the cart to the bed,—this latter being accomplished with remarkable ease, expedition, and no exposure of the patient.

The emergency case—a fracture of the head and arm—fell to General Hospital. The "doctor" responded immediately, removed the temporary bandages and applied sterile dressings with a skill that bespoke hours of practice on "spiral reverse" and "recurrent of the head."

St. Luke's nurses made the most of the well known exasperating visitor! In fact, she was so characteristically upsetting, it was necessary to apply turpentine stupes to ease the patient. A new patient was admitted, heart and lungs examined by the internes, and special orders left for diet.

Bethany gave evening care; washed hands and face, brushed teeth, combed hair, rubbed backs, and gave all the small attentions so essential for a good night's rest.

Research Hospital had a fitting climax,—just when the ward was full of visitors, the fire alarm sounded. The nurses efficiently and expeditiously covered the patients, rolling the sheets closely about them, and carried them from the ward.

"In the Footsteps of Florence Nightingale," a fifteen-minute film, was shown and "The End" of the picture was also the end of our happy days at Junior College.

WHAT NURSING MEANS TO ME

By Katharine Emma Peirce, A.B., 1915; R.N., 1921
St. Albans, Vermont

I LEFT my high school and college with the same undefined purpose and the same mass of tangled theories which fill the minds of most students. I wanted, as most people do, to find some work which would suit me and would be of some use to the world. Teaching was not attractive but was so conventional as to be almost unavoidable. Social work held out a vague appeal, but with no point of contact quite magnetic enough to lure me in. Nursing did not occur to me, because of its old bugaboo of physically exhausting and socially degrading qualities. It is because of the falseness of that reputation and my regret that nursing as a profession was never presented to me until three years after I left college that I want to tell every student and young graduate who will read, what this work has meant to me.

First of all, it means a type of work which is so fundamental and so rapidly growing in magnitude that every tiny effort of interested workers must count. Constructive education, efficient work, wholesome play, full enjoyment of life, progress of individuals or nations, depend largely upon health. In the great plan for improving health new paths are constantly being discovered which lead to fields in which a nurse may be of value. Who can stay away when she is shown that hospitals have turned from semi-prisons to places of comfort largely through the development of nursing? Who can shut her eyes to the fact that the number of babies who die every year is slowly lessening, and that there is a proven need of nurses to help bring it lower? Is there not a challenge in the fact that scientific research has produced the sure method of reducing diphtheria which only waits to be applied? Yet really permanent improvement can come only as quickly as the majority of the people come to see and accept the more enlightened methods of healthful living; and they will "see" only as trained workers help to teach them. It is a vision worth working for. Then, as a more immediate source of interest, there are the people to be helped, to be studied, to be despaired of, to be joked with, and to be liked sincerely. I defy anyone to turn back calmly to a desk and figures or even to books, after having watched some little boy fight his way back to health, and having followed his reactions to the tricks life was playing with him. There, too, is his mother, losing her drab gossipiness and apathy, as she waits and fears and reflects on her own shortcomings and gets down to simple truths. A nurse may not

look or act like the traditional "mother of the world," but she really does bring service of recognized value to families at their most dependable and sincere moments, and can be a sort of detached source of strength to them in their weariness. It is all very real and increases both one's respect and one's humility.

At the same time there is a constant stimulus to one's sense of humor as a wholesome lever. The small school boy who brings forth the unanswerable argument during one's school talk, that his grandfather never had a tooth brush in his life and never lost a tooth; the great husky man who picks up a howling youngster on each arm and sings lustily and tunelessly to quiet them; the young Jewish child who tells you innocently that her first name is "Hades";—these are but poor examples of the incidents which make one laugh through half the day, and understand people better.

As a direct benefit to me, I consider my three years' training of inestimable value, for it provided a purpose which required persistent interest, an active outlet for emotions, a practical knowledge of the basic rules of normal living and a useful foundation for almost any future activity. I wish that my satisfying experience could help to lead others into the interesting field of educational nursing work.

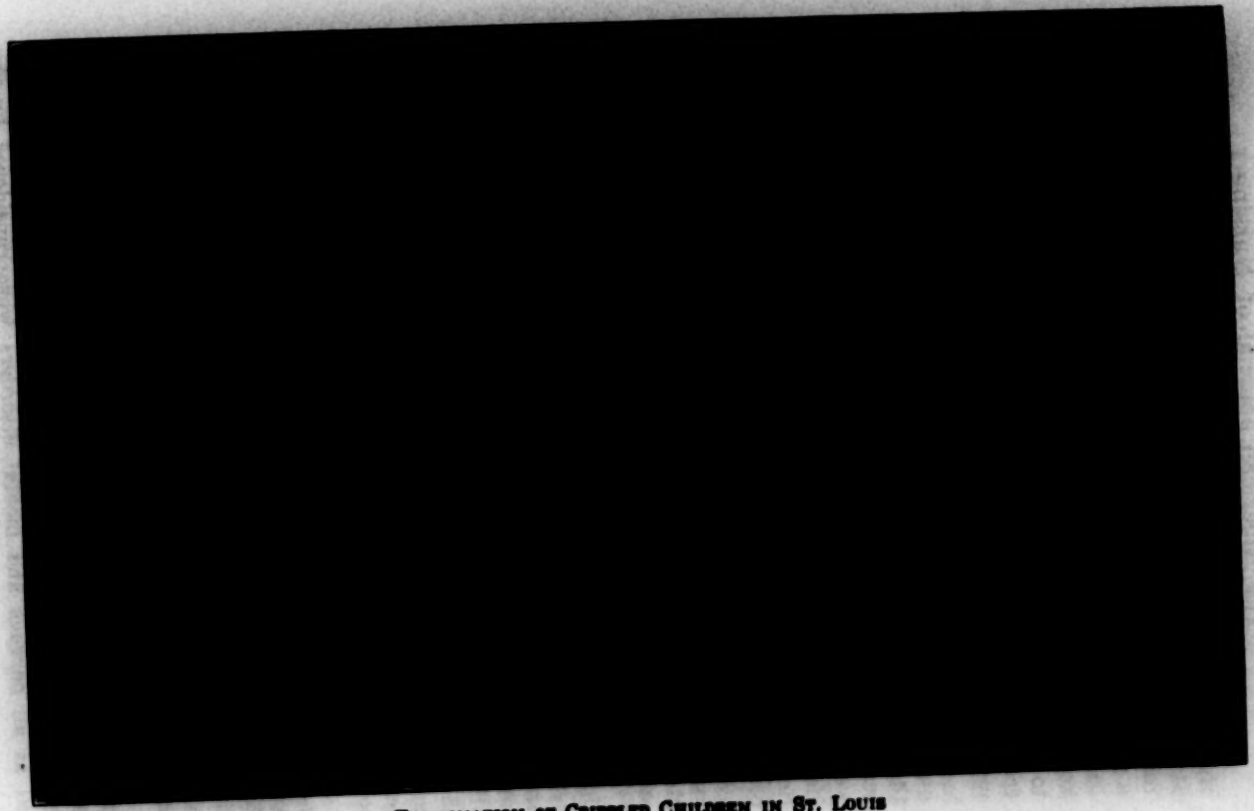
DR. LORENZ AND THE CRIPPLED CHILDREN OF THE SOUTHWEST

A DEMONSTRATION OF THE VALUE OF PUBLICITY AND A SPLENDID DEMONSTRATION OF PROFESSIONAL COÖPERATION

By Grace L. Anderson, R.N.
St. Louis, Missouri

HEYWOOD BROUN, of the New York *World*, says that "If doctors knew a little more about the newspaper business they would realize that even if he had fought it tooth and nail, Dr. Lorenz could not possibly have avoided the eager attention and scrutiny of the press," also that "orthopedic surgery is not beyond the need of advertising." He goes on to say that although hundreds of cases could have been treated just as well by local surgeons, again and again it had been revealed that the parents had never thought of taking their children to anybody until they read about Dr. Lorenz in the newspapers. They had no idea what orthopedic surgery was, nor of what it could do.

The *Post Dispatch* of St. Louis, stirred by the fact revealed in Dr. Lorenz's clinics, worked out a campaign of publicity to bring out



EXAMINATION OF CRIPPLED CHILDREN IN ST. LOUIS

the crippled children of the city for examination, treatment and cure. It was first of all ascertained that St. Louis had adequate facilities for the care of all who needed help. With the local Medical Society a plan was evolved, and a notice appeared daily in the *Post Dispatch* in the name of the Medical Society, offering free consultation and hospital care to all crippled children whose parents could not afford to pay for treatment. Knowledge of crippled children was sought from all who knew of cases not under care. January 23, 24 and 25 were set aside for the preliminary examinations.

Four hundred and seventy-three names were received. One hundred and twenty-three children lived outside the city, most of them in near-by towns in Illinois and Missouri, but names were also sent from Ohio, Iowa, Kansas, Arkansas, and Texas. No requests were ignored. The thirty-six nurses of the Municipal Nurses' Association visited all homes in the city to get details regarding the condition of the children, the necessity for transportation and the social condition of the parents. All deformities were examined, clubfeet, bowlegs, knockknees, tuberculosis of the spine, hip, and knee; infantile paralysis, curvature of the spine,—congenital dislocations, etc. Members of the automobile club furnished closed cars and drivers to carry the children to and from the clinic.

The clinics were held from 9 to 12 and from 1 to 5, each of the three days. Fifteen physicians were in attendance at each session, representing the orthopedic surgeons, general surgeons, pediatricians, and neurologists of the society's membership. Fifty-one different physicians gave some portion of their time to this work. The automobile service was also extended to the Municipal nurses so that no time should be lost in collecting all necessary data. A complete index card was made out by the nurses, giving the nature and duration of the deformity, the facts about previous and present treatment, the economic status of the family, etc.

It was necessary to have a corps of nurses present to assist at the examinations and the *Third District of the Missouri State Nurses' Association volunteered to supply nurses from their membership.* Fifty in all were needed, and none failed to respond when called upon. They were all nurses engaged in *private duty* in the city. If obliged to answer a call, each nurse left money at the registry to pay a substitute in her absence.

The Children's Aid Society sent its workers into any homes where a social problem was brought to light through the survey of the Municipal nurses.

In making the examinations, the nutrition of the children, as well as all nervous and mental disorders were considered by the

experts. A complete diagnosis of each child with reference to all abnormal conditions was written and given to the Public Health and Instruction Committee of the Society, who with the examining physicians assigned the children to the treatment or hospital best fitted to the individual cases. The different hospital clinics were then notified and assumed the responsibility for the continued care of the children.

The interest in this game of the Pied Piper was not confined to St. Louis. Kansas City's Medical Society has plans for a similar campaign in that city. Governor Hyde instructed the State Board of Health to consider an adaptation of the plan for the state and the Director of Child Hygiene, Dr. Ira Krause, attended the examinations to see how the state at large might benefit from further work.

The *Journal of the American Medical Association*, commenting editorially, said:

> One outcome of the publicity given to the visit of Dr. Adolph Lorenz was the bringing to light in New York City of knowledge of a number of crippled children who had received no competent medical attention. The medical profession has always been ready to give its services freely to such unfortunate children, but through ignorance of our language, neglect on the part of parents, or for other reasons, many of these patients have not made use of the means available for their cure and relief. • • • It is a commendable and sincere effort surely to utilize the advantages of publicity for aiding the crippled children of the community. It is a form of effort which, since time immemorial, the medical profession has been wont to conduct quietly and unostentatiously. It is now proved that a considerable foreign element in our community which was not being reached through regular channels can be reached to some extent through newspaper publicity methods. The medical profession of Missouri is to be commended on its sincerity of purpose and on the manner in which it has attacked the problem. Let it be remembered, however, that the publicity is being used in searching out patients for free treatment, that the effort is wholly philanthropic and not a matter of personal aggrandizement. The newspapers give the space, and the physicians give their services.

It is too early to tell what the results will be in individual cases, but here are some facts. Four hundred and seventy-three applications were received and investigated; 248 children appeared for examination; 225 of this number needed care. It is estimated that 80 per cent can be benefited or cured; 10 per cent may not improve and another 10 per cent may be regarded as hopeless, being of obviously low grade mentality. These latter cases, however, cannot go unattended. It is the opinion of the committee that their care should be assumed by the State, and here is shown the need for homes for the feebleminded children. The committee also recommends a separate school for crippled children. St. Louis has splendid special schools, but none for this class.

The need for the establishment of some social agency that shall be responsible for the attendance of the children at clinics for a long period of time was evident. Mothers cannot, in many instances, leave the home and neglect other children to make the many long and tedious trips necessary if the children are to be cured. More Municipal nurses are needed to give instruction in feeding and hygienic care. This is a direct community responsibility. The out-of-town children as a rule, had received no treatment, showing the great need for health work in isolated communities. The committee declare their work just begun. Taking account of stock has been illuminating and will be productive of far-reaching results in city and country alike.

As Heywood Broun said, "Orthopedic surgery is not beyond the need of advertising." By the way, it is singular that the foreign born, always the scapegoats, are so much more easily reached by the press than by word of mouth. It would be interesting to know how many of these children come from our native-born population. The question is fundamentally one of economics rather than nativity.

THE SOCIAL LIFE OF STUDENT NURSES

By Emilie Sargent, A.B., 1916; R.N., 1920
Detroit, Michigan

THE writer makes no claim as an authority on any phase of nursing education, but because of her deep interest in the subject presents her reflections on the social life of student nurses from the point of view of a recent graduate. The term social life is here conceived in its broadest sense as covering not only recreation, but all those contacts and experiences which create group initiative and loyalties.

There is no disputing the fact that the chief business of a nursing school is to teach students how to care for the sick in the most approved, scientific manner. As the apprentice age is past, we will assume that a standard school provides the adequate theoretical and practical training to enable its graduates to enter the field of their preference, that is, institutional, private duty or public health. And as there is always a goal to reach we would say that a standard school not only aims to produce skillful nurses, but socialized women as well.

The public has flung wide the door of opportunity to nurses to prove themselves the prime factors in making health the concern of the community rather than the business of the medical profession alone. There are over 11,000 public health nurses in the United States we are told by the National Organization for Public Health

Nursing, nor is this conception of the nurse in relation to the community health confined to public health nurses, for all nursing is social work and every nurse a health teacher.

Those nurses who are successfully meeting this new era of socialized health are generally doing so by the sheer force of their personalities triumphing over the painful trial and error method, whereas, had they previously been given fuller experience in team work, the task could be more easily accomplished. The nursing school can meet this situation, and in increasing numbers is meeting it, by including sociology and psychology in its curriculum, and by encouraging student organization.

Literary schools have always considered the social life of their students as being an important factor in a college education. It would seem equally as important a factor in nursing schools, perhaps more so because of the diversity of types to be found among nurses, that is, in age and educational contrasts. State laws vary in their age and educational requirements, as do also individual schools. However, the minimum requirements for admission to a nursing school are eighteen years of age and one year of high school education. Therefore, some applicants are admitted directly from school, while others enter after years in some other kind of work ranging the whole gamut of professions followed by women. In the writer's own class there were ex-clerks, ex-stenographers, an ex-dressmaker, an ex-actress, an ex-missionary, ex-teachers, ex-musicians, a group who had stayed at home, and a still larger group who had entered directly from high school and college.

Yet no matter how strikingly unlike in age and cultural advantages the members of any nursing school may be, their very presence denotes a common ideal, that of greater service. And what possibilities for stimulating friendships and mutual helpfulness exist in such a varied personnel! It is this goodfellowship which is the basis of unity and school loyalty and is, therefore, surely more valuable than rigid adherence to the "Seniority System" which should be forgotten in off-duty hours.

Every school provides some kind of entertainment for its nurses, if only an annual Christmas party, a reception following the graduation exercises,—and usually the Juniors give the Seniors a dance. In the last case, the planning and execution of the event are in the students' hands so that plus a good time, they get a lesson in team work, the purchasing of refreshments, selection of favors, decorations, music and the thousand and one little things that go to make up a real dance with all the trimmings, which is certainly invaluable experience for any group.

It has been the desire of nursing school executives to spare their busy nurses the time necessarily consumed in preparation for parties by assuming the responsibility themselves and thus overlooking the fact that there is much pleasure in the work of preparation as well as experience to be gained. We feel that it is this same motive which keeps many schools from encouraging student government. However, the eight-hour day has reduced so many difficulties that the plea of not wanting to add another burden to the nurses in their time off duty is hardly justifiable in the face of the value received by the student in having a voice in her government, for by so doing she is developing poise, constructive thinking, the faculty of ready expression, and the power to judge without bias.

The students' line of least resistance is placid acceptance of the rules decreed by the powers that be, and yet in such situations one may expect infringement on the letter of the law whenever possible, for the slogan is usually, "Rules are made to break," and the breaking becomes the passing jest. On the other hand, to have made those rules one's self and to be responsible for upholding them puts quite a different face on the matter,—infringement then is a point of honor. Therefore, the moral tone of a school is necessarily higher if the students have a voice in their governing than if they have none. Any girl who is not big enough to respond to an honor system is certainly not desirable material for a nurse, and after a fair trial, should be dropped from the school.

Furthermore, the disciplinarian function of self government is only a phase of its work, for it covers the social life of the student group as well. It organizes the student body, formulates public opinion, and is qualified to act upon any problems confronting the group, whether it be the kind of discipline to mete out to a refractory member or a decision as to the advantages of the formal dance versus the informal.

Some schools achieve a certain degree of group coöperation through their class organizations which, as far as it goes, is fine but usually in such cases, class spirit supersedes school spirit and decision on any pertinent question becomes difficult, for just as surely as the Seniors approve, the Juniors will disapprove.

We have talked with the members of several schools in which their own branches of the Young Women's Christian Association serve the purpose of student organizations and act as devotional, educational and social leaven. Those schools are to be congratulated upon the successful operation of their own Young Women's Christian Associations and if they fill the gap which always exists where there is no student organization, they have accomplished the same aim. We

are not in a position to judge, but our opinion is that the Young Women's Christian Association should be a product of the larger student organization and should not attempt to take its place.

Each school has to solve its own problems, but if it keeps abreast with the times it will emphasize the value of having its students actively interested in the administration of their own affairs in the off-duty hours. And you, student nurses of the present and the future, must be keenly alive to your privileges; you must realize that much of the responsibility of obtaining self government is yours, for if you do not ask for it, the executives of the training schools cannot give it to you. Self government is largely subjective and not objective and therefore can not be literally thrust down your throats; the administration can encourage you to inform yourselves of the action of student government in other places and give you the opportunity of making your own choice, but they will not compel you either to accept or reject it, for if they did it would not be self government.

There is always a bogy of some kind abroad to frighten young women from undertaking the nursing profession, the "old timers" alarm them with direful tales of rigid military discipline, which today, as a matter of fact, has almost vanished from our nursing schools; others harp on the hard work story, forgetting that since their day, marked improvement has been made in nursing education as well as in other educational fields. *We must disabuse the public mind of its false conception of the hardships endured by the student nurse and replace it with the knowledge that there are degrees of quality in nursing schools which necessitate careful discrimination on the part of the applicant.* No course is as vital to women as that offered by the nursing school. The extent of the student's realization of this fact will depend greatly upon her maturity and vision.

The recreational features, too, have been vastly enlarged. Many nursing schools are now equipped with excellent libraries for general reading as well as medical and nursing texts, a few boast of an auditorium with a stage to accommodate amateur dramatics and musicales; some have a gymnasium, swimming pool, basketball and tennis courts, while others, because of their close proximity, are able to make use of those recreational facilities already established; this is particularly true of the nursing school which functions as a department of a university. Another delightful attraction which some schools provide is a vacation cottage usually situated on a lake and accessible enough for week ends and days off duty.

Of course, recreational facilities are an expense and that is why they are not more extensively supplied. Some schools are fortunate enough to have this problem solved by pleasure endowments, that is,

some one vitally interested in the nurses' social welfare, contributes a sum to be used solely for recreational purposes.

A few schools have as a member of their staff a social director who serves entirely as an adviser and counsellor to the student body in their off duty hours, fulfilling in some respects the duties of a glorified information bureau, outlining desirable trips in and around the city, suggesting the worthwhile plays of the season, and indeed, answering the endless questions of the newcomer in a big city. She also, by virtue of her enthusiasm, stimulates interest in athletics, amateur dramatics, and music.

The reaction of the student group to a quickened, more intelligent interest in making the best use of their recreational hours, proves the success and need for such a person as the social director. It must also be a great relief to the already overburdened superintendent to feel that the direction of the social life of her school is in the hands of some one who has both the preparation and the time necessary for its furtherance.

While the model for any school is to provide the very best facilities for teaching nursing, for comfortable housing, and for recreational and cultural advantages, you students can do much for yourselves along the latter lines. Through your student organization you can promote athletics, dramatics, music and general sociability. You will find that the superintendents and principals of your schools will respond to your interest and suggestions for making the community life in the nurses' home count.

A Senior student was heard to say that in the three years of her training she had never approached her superintendent with a suggestion or question and she felt that her passivity was commendatory, but wrongly so, for the negative passive type of girl is as much out of favor in nursing schools as she is in college, business, or any live situation. If you seek it in the right spirit, you will always have the coöperation of the administration of your school. This point of view is most necessary, for you students of today will be the administrators of tomorrow.

The Vocational Department of the National Organization for Public Health Nursing, now reëstablished, has prepared a small poster for the bulletin boards of training schools and nurses' clubs. Numbers have already been sent out. These posters will be sent upon request to headquarters, 370 Seventh Avenue, New York City.

APPLIED BACTERIOLOGY

By a Bacteriologist

I. IN DIPHTHERIA

THE prevention, treatment, and control of diphtheria depend almost entirely upon bacteriology and its applications. The antitoxin used to treat the disease is produced in the serum of a horse by the inoculation of toxin, which is a by-product of the growth of the diphtheria organisms. Toxin is also used in the Schick test.[1] Quarantine is based upon the presence of diphtheria bacilli in the throat. The doctor can in most cases diagnose a case of diphtheria by the clinical picture; notably, fever and membrane in the throat. He cannot, however, determine by the appearance of the throat the absence or presence of diphtheria bacilli, for the patient harbors diphtheria bacilli long after the throat has returned to a normal appearance. Hence release from quarantine depends upon bacteriological examinations showing no diphtheria bacilli. This is true except in the small per cent of cases that persist in harboring the organisms for a longer period than the maximum quarantine period required by law. The law varies in different states. The diphtheria quarantine regulation with which I am familiar is 21 days or two negative throat cultures taken after the ninth day of disease. Persons harboring the germs after the 21-day period are released from quarantine, but are isolated as carriers. Such carriers are active carriers. (They probably carry the organisms in hyperthrophied cryptic tonsils, which is true of most diphtheria carriers.) Besides the active carriers, we have the contact carriers. These persons have inhaled the bacilli when the patient has coughed or sneezed in their faces, but have not become ill, due to the fact that they are immune (have natural antitoxin in their blood), or are protected temporarily by a prophylactic dose of antitoxin.

So far, in this discussion, the term bacteriological findings has been used to designate a microscopic examination of a slide preparation made by smearing and staining some of the growth from the culture of the throat swabbings. A microscopic examination gives us only one means of identifying bacteria. It shows us their size, shape and staining characteristics. This is only one step in the classification of an organism. For example, not all the bacilli that look like diphtheria bacilli are capable of producing toxin, and consequently are not

[1] The Schick Test. Robert A. Kilduffe, M.D. *American Journal of Nursing*, Vol. XXII, No. 4, p. 254.

pathogenic. These diphtheria-like organisms are diphtheroids and are non-virulent and non-pathogenic.

Since many healthy persons harbor diphtheroids in their throat and only a small per cent are carriers of virulent bacilli, it becomes necessary to resort to a virulence test in order to pick out the individuals who are dangerous to their associates. It is well to remember that in taking swabs for culture from the throat of a carrier, the germs may be carried in the crypts of one tonsil, and not in the other; also, that diphtheria organisms are carried in the nose of both active and contact carriers. Diphtheria-like bacilli are sometimes the infecting organisms in otitis media. They are also found in wounds and in the vagina.

THE VIRULENCE TEST

Guinea pigs are used for the virulence test, as they are more susceptible to the toxin than are the other laboratory animals.

The diphtheria-like bacilli recovered from the throat are grown for 24-48 hours in broth or on a Loeffler's serum slant. The broth culture or a suspension in normal salt solution of the diphtheria bacilli from the Loeffler's slant is inoculated subcutaneously into the guinea pig. If toxins are produced by the bacilli, the guinea pig will die of toxemia in 12-72 hours. The autopsy of the guinea pig will show typical pathology which cannot be confused with other causes of death. One of the most striking lesions is the very red congested adrenals, which are normally creamy white. If no toxins are produced by the bacilli, the guinea pig will show no ill effects from the inoculation.

STUDENT GOVERNMENT

By F. Dunne
Student Nurse, Chicago, Ill.

OUR class entered Hahnemann Hospital Training School for Nurses in September, 1919. Discipline was based on the same plans as found in all training schools not having student government. One late leave was permitted a month and the request for the same had to be in the office not later than six o'clock. All social functions were proposed and given by the superintendent and supervisors and as a matter of fact we knew little about the activities of the school.

Our superintendent talked to us, following one of our class lectures, on student government. She read to us ideas from a training school having student government. The ideas were then discussed

and the result was that all members of the class were in favor of adopting such a plan.

A meeting was called by the superintendent and student government was adopted. Usual officers were elected. The officers drafted a constitution and by-laws to be presented to the class for adoption at our next meeting, to be held the first Tuesday in each month. Dues were twenty-five cents per month, with a fee of one cent per day for delinquent days. At the next meeting the constitution and by-laws were presented and adopted. It has been up to the members to enforce them.

I want to mention that we were the youngest and only class to adopt student government at the time, it having been rejected by the Juniors and Seniors.

A monitor was appointed each week to report all illness among the class members to the training school office and to take charge of the residential quarters. The report was to cover orderliness, ventilation, obedience of rules concerning lights, which were to be out at 10:30 p. m., and general behavior of students. Forfeiture of privileges was imposed for misdemeanors of any kind. An entertainment committee was also appointed to take charge of the social functions. We were permitted to have two late leaves during a month, which were to be reported the following days.

At the close of this meeting the class felt they had entered a different training school, that their future time at the hospital would be more sociable and their work more interesting. Of course, our discipline had nothing to do with the Juniors and Seniors.

Since we organized, we have had many more means of entertainment both summer and winter months. We wanted a gymnasium and dancing class one night a week, which was arranged for. We have also started a school paper which has proven quite interesting among the many friends, doctors, and graduates of our hospital.

Other advantages worth mentioning are that no student is allowed to refuse to do anything she is asked to do by her fellow students and that the students take more initial responsibility. An illustration of the efficiency of student government is shown in the following case. A member of our class, who after repeated offenses and much reproof still persisted in disobeying rules was disciplined by her class. She was a girl of very high spirit and pride. Yet in this instance she accepted her punishment with a splendid attitude of genuine good sportsmanship. She was admired for this attitude by the class and it proved not a detriment but a distinct help to her and to the class. This same spirit of good sportsmanship and discipline has prevailed in all similar conditions in the class.

Two classes have entered the training school since our organization. As a result of the experiment of student government in our class, the younger classes have adopted it and the whole school is now under one constitution and by-laws. The authority is vested in the Student Council, which includes a member from each class, the president and the honorary president.

A very much better understanding exists between Preliminaries, Juniors, Seniors, and graduate nurses, and much better discipline in the school. It is also giving the students a good training in parliamentary procedure, especially as we affiliate for a course of lectures on Parliamentary Law. We have been privileged by the Alumnae to rearrange the library and appoint two of the members as librarians.

It surely would be splendid to see student government established in all training schools for nurses, because of the many lessons it teaches the students.

CRACKED ICE FOR THE HOSPITAL UTILITY ROOM

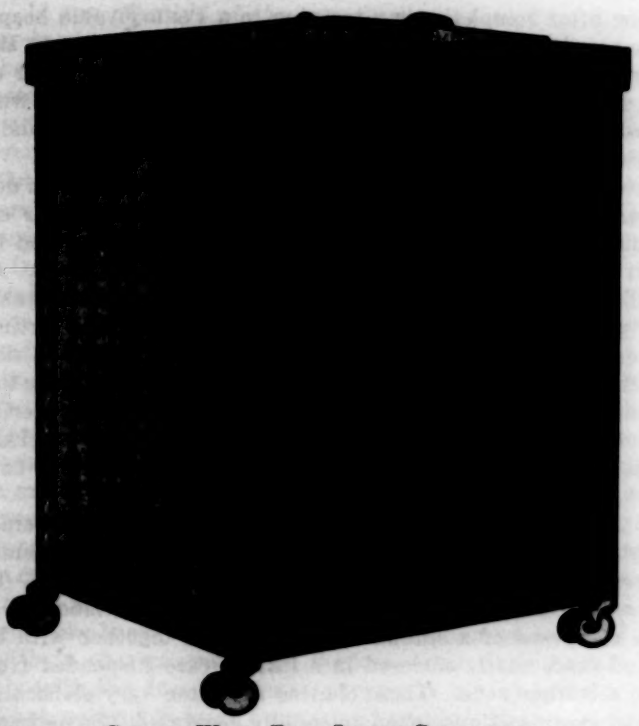
By Elizabeth Pierce, R.N.
Cincinnati, Ohio

PROVIDING cracked ice for ice-bags, for use in giving treatments, etc., has always been a problem in the hospital where no provision has been made for a supply to be kept in the utility room, or easily accessible to it.

The sight of ice-bags on the kitchen sink, waiting to be filled, is no unusual sight in such an institution. Even in the care of typhoid patients it is difficult to prevent the ice-bag being taken into the kitchen if that be the only source of the supply.

There are many ways of solving this problem. The accompanying illustration shows one which seems especially good where space must be considered. It is a single wood ice-cream container for a five-gallon can. The compartment is filled with cracked ice each morning and water from melted ice drawn off. There is no drain pipe connection, although this could easily be made. This, however, would interfere with moving the container in cleaning the floor.

In the institution where this method is being used the saving of cracked ice has been great. The superintendent has placed it as high as one-third to one-half. This alone should make some such container a very desirable part of the utility room equipment. The Instructor of Nursing Procedure and those responsible for careful detail in nursing technique will declare it not only desirable, but necessary.



SINGLE WOOD ZINC LINED CONTAINER
Size 21 x 21"—Height 26½"
(Drawing made by a Student, Christ Hospital, School for Nurses, Cincinnati, Ohio)

OPPORTUNITY IN AFRICA

BY ALICE D. MUSSELMAN
Freetown, Sierra Leone, West Africa

SOMEONE, not long ago, said to me, "Once you acquire the taste for African pepper you will never be fully satisfied elsewhere. Though you go home on furlough, weary because of the many palavers and the inroads of the climate upon your health, yet, after a few months in America, you find yourself longing for the variety of experience, the charm of roughing life in everyday contact with this primitive people and the sweet consciousness that your life is counting for good." It is the "Lure of Africa."

Soon after completing my training in a Pennsylvania hospital, I came to this land and set to work almost immediately in our Mission Dispensary at Rotifunk, in Sierra Leone, West Africa. Our doctor left on furlough six weeks after my arrival and I was left with the whole countryside at my mercy—the only person for miles and miles around with any medical or nursing training.

True, there were plenty of native medicine men, or witch doctors, who were often called upon by the unfortunate sick. Their custom is to squat on the ground, cast a few shells before them and by the position of these shells wisely tell the prognosis of the disease. A goat horn filled with some fetish medicine (a wicked looking paste enriched, perhaps, by some portion of a human body, the victim of a secret cannibal society) is then tied around the patient's neck or wrist; the drum beaters and dancers next raise a hideous noise to drive away the evil spirit (every sickness or misfortune being ascribed to some evil spirit) and the patient, in many instances, is carried from house to house, or from village to village, trying in this way to evade the evil spirit.

If these measures do not avail, the Mohammedan medicine man is called in. He will sell the patient one or more charms, sometimes but a scrap of paper with bits of the Koran written on it. This is placed on the wall or over the doorway; or a more elaborate charm may be composed of a similar scrap of paper, together with bits of mica and sand, neatly enclosed in a leather case suspended from the neck on a leather rope. These charms are often very elaborate, consisting of many sections, often splendidly decorated. Sometimes they are suspended from the waist (always next to the body) or, in case of an affliction of an extremity, a charm is fastened around the ankle or below the knee to prevent the malady from extending to the upper part of the body. Babies are frequently protected against evil spirits by a labyrinth of ropes fastened around the neck and waist to which charms and shells of varied degrees of potency are fastened.

Poor little babes! It is indeed a "survival of the fittest" for the African child. Coming into the world with no preparation whatever made for it in the way of clothing, bed, or other necessary comforts, it starts life, sometimes with a thin handkerchief for a covering, more often with no covering at all. The mother is expected to get up and be about her work the same day the child is born. Even when they come to our Mission Dispensary for delivery, they walk home the same day, in spite of our protests. When complications follow, it is hard for them to believe that the fault is often their own. Their mothers and grandmothers did so; why not they! The colostrum is usually squeezed out by hand, as they say it is dirty and unfit for the

child. If any affection of the eyes develops, the juice of a hot red pepper is mercilessly squeezed into the child's eyes—or onion juice may be substituted. If there is any skin disease, certain leaves are gathered from the bush (jungle). These are boiled or beaten into a paste and mixed with water in a pan in which the child is then bathed and every now and again made to swallow a handful of the concoction.

Not that the mothers do not love their babies,—I have seen young mothers rush through the streets of our town, wildly tearing their hair and wailing in the deepest grief because the little babe had been taken from them to be buried in the dark, cruel earth, never more to be seen by her—dead and gone with no spiritual hope or comfort for the poor mother. Nor is it because these leaves, herbs and roots from the bush are without medicinal value. Many of them, indeed, are used in the very tinctures and tabloids familiar to us in America. But their dosage and use are not understood by the people here and therefore they are often of more harm than good.

It is no easy matter to instill new beliefs and habits into those whose minds are steeped in superstition and ignorance handed down from generation to generation for centuries past. Yet, slowly, changes are being brought about in those sections where foreign doctors and nurses come in direct contact with the people. Slowly the people are learning to take better care of themselves and of their babies. Now and again one hears of a family, or head of a family, who has entirely lost faith in charms and witch doctors,—one who is ready to deal sensibly with the dreaded disease it may be his lot to fight.

What we need is more doctors and nurses. Here is a chance for those of you who want to do real good in the world. Come to Africa and help us teach these people better ways of living and thinking. If the routine of your work seems dull after the months and years in France, come to Africa where real adventure awaits you and where opportunity for helping others, unlimited and unsurpassed, is languishing for want of notice on the part of those in whose power it is to help so much. Life here is real; the work is appealing; the people are needy; a welcome awaits you.

Forty-one states have now accepted the terms of the Maternity and Infancy Law, either by legislation or by proclamation of the Governor in the absence of a legislative session; $480,000 was appropriated by Congress for the fiscal year ending June 30, 1922. For the year ending June, 1923, $1,240,000 is available.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., DEPARTMENT EDITOR
Collaborators: Blanche Pfefferborn, R.N., and Grace Watson, R.N.

CONFERENCES WITH HEAD NURSES[1]

BY EFFIE J. TAYLOR, R.N.
Associate Superintendent, Johns Hopkins School for Nurses

IN introducing the subject, Conferences with Head Nurses, for round table discussion, I would like to emphasize the word "conference"—to consult—to exchange ideas.

The first position offered to a young graduate in a hospital is that of head nurse in charge of a ward or floor. The position usually is accepted with enthusiasm and frequently with confidence in her own ability. Looking on with the recent student nurse's point of view, the position of head nurse is one which emancipates, which sets free the hard-worked and imposed-upon senior from her bondage and gives her a position in which there is no work to do. Often from the student's point of view, the head nurse has little or nothing to do and it is quite easy to walk around, dressed in white, to look on and find fault. Usually this is what she tries to do at first,—simply give orders, make changes, walk around and look on, and as a result troubles soon begin to accumulate. The obvious reason is that, as a student nurse, she has had the viewpoint of the student only,—the viewpoint of getting for herself and of keeping in mind only one specific thing. As a head nurse, she soon finds out that she must have not only a participating interest but a controlling and working interest also. It is not only what she can get out of her work, but what she can personally contribute and bring to it. It is not only a matter of keeping the every-day work going but of building it up and preparing for tomorrow, and with this revelation disappointment comes as she realizes her inadequacy.

I am always glad to see to some extent at least this new attitude, for it is not till that first flush of perfect satisfaction with herself has faded that much impression can be made or that advice will be welcomed from persons of greater experience.

Often the young head nurse after the first few weeks in charge of her ward will say: "I am so discouraged. I do not seem to find anything as I thought it would be." At this period, it is well to begin

[1] Read at the annual meeting of the Alumnae Association, Department of Nursing and Health, Teachers College, Columbia University, New York.

a series of conferences. In the first week or two, the young head nurse has visions of a reconstruction. She has opinions on and solutions for everything. She would wish to change all routines and oftentimes banish discipline and order, but as she has to meet each day some new problem, such as sickness among the nurses, which means an inadequate staff, and emergencies of all kinds, she has a new reaction and finds that being a head nurse means work and that an immaculate white dress and unsoiled hands are not always compatible with success. I have found it a good plan, at the first of the school year when new appointments are made, to give only the absolutely necessary instructions and help to the new head nurses and to watch them carefully, listen to what they have to say, guard against any mistake which might occur as a result of their inexperience and ignorance, but to a more or less degree give them an opportunity to stretch their wings and feel that sense of freedom longed for by every nurse after three years of training. During the course of training, instruction is given in a more or less formal way, but at this period a new method is desirable and instruction in the form of conferences is most satisfactory.

To gain the young head nurses' confidence is the first step, and I have found it of inestimable value to begin an informal but organized series of conferences in my own sitting room with a cup of tea to break down the barrier that unhappily seems to exist between the students and the faculty. I usually tell them at this first meeting why I think it is well for us to get together. I explain many of the things that previously they could not understand. I try to tell them what responsible positions they hold and how much we depend upon them, that really the head nurse on a ward is the most important officer in the school and that the care of the patients in her ward, the training of the nurses, and the reputation of the hospital, depend more on what she as a single individual contributes than on that which anyone else contributes.

Usually on the first day there is not much exchange of ideas, but they always listen and learn. The reaction to this first lesson is always good and it is usually difficult the following morning to get round the hospital on schedule time, as each one is anxious and impatient to talk about herself and her ward.

At this period, the supervisors have their greatest opportunity, and if they are tactful and wide-awake, they will get coöperation and be able to guide the new head nurses in an entirely new way.

I have found it wise not to include the supervisors at the regular weekly conferences with the head nurses. It is much easier to gain the confidence of the younger group alone. At the same time, the super-

visors and instructors should be kept in touch with the problems the young head nurses have to meet that they may the more intelligently give advice and help and thus prevent conflict and confusion. To bring this about, I have found it advantageous to hold frequent personal conferences with the individual supervisors and discuss the particular problems and the method of dealing with them from all points of view in their specific departments, translating and interpreting the reaction which I have gained through my personal contact with the head nurses, and their reaction through personal supervision.

A good deal of time is taken up in this way, but I do not believe the same result can be obtained in any other way, and the mutual understanding which grows and develops is well worth the time and energy spent.

I do not feel that any method which has not been practically tried out is of particular value; therefore, I am simply describing the method which I practice and am attaching to this preliminary discussion some outlines and some material which I use.

The conferences are arranged to suit a local situation and the outlines accompanying are entirely the same and have not been adapted for use in other institutions. Still, they may be suggestive, and while the subject matter is written for one school, some of it may serve as a basis for others.

The outline for the regular conference is as follows:

Conferences with Junior Head Nurses, once each week, 4-5 p. m.

I. Why did I choose nursing as a profession? Discussion.
   What is there in it for my own development?
   What can I put into it to make it the better for my being a member of it?
   Why have I chosen to do institutional work? Discussion.
   The ward as a unit.
   The ward as an integral part of the whole.
   My responsibility as head nurse in that ward. Discussion.

II. The student nurse. What does the term mean?
   My responsibility to her and what she has a right to expect from me.
   The marking and grading of student nurses. Discussion.

III. How can I become a teacher?
   Methods of teaching practical work in general.
   Supervision and its relation to teaching.
   Why are the executive ward duties allowed to prevent the head nurse from becoming an efficient teacher?
   What is my most important responsibility as a head nurse? Discussion.

IV. How to plan a day's work? Posting of hours.
   What should I expect from those for whom I am planning?
   How can I obtain good work from student nurses?
   How should I correct mistakes?
   What value should I place upon mistakes?
   Discuss mistakes and errors which occur in hospitals and compare them with mistakes made in other institutions or in other lines of work.

Should we develop initiative in pupil nurses?
Discuss reasons pro and con.
Why are routines necessary?
How can I teach the importance of these things?

V. Methods of ward inspection.
Methods of exchange.
Methods of caring for hospital property.
Ward standards and equipment. Discussion.

VI. General discussion on: Personal problems connected with ward administration; orderlies, maids, nurse helpers; the commissary department; storerooms, etc.
How can cooperation be secured?

Other conferences follow every other week at the same hour on difficulties presented by the head nurses themselves in their experiences. The exact form which these conferences will take is determined by the need of meeting the nursing situations.

Associated with these conferences will be demonstrations by the practical nursing instructor on how the student nurse is being taught in the classroom. The object is to insure a uniform method of teaching and to prevent conflict in the mind of the young student nurse. Not very much of this has been done yet, except in the regular monthly demonstrations.

The following slip is given to head nurses when the conference, How to Plan a Day's Work, is discussed:

SUGGESTIONS FOR HOURS FOR SENIOR STUDENT NURSES ON WARD DUTY

7-9 a. m.	7-11 a. m.	7-12 a. m.	7-11 a. m.	1- 5 p. m.
1-7 p. m.	3- 7 p. m.	1- 4 p. m.	7-11 p. m.	7-11 p. m.

Each group of hours brings varying experience. We owe it to the Senior student nurse to give her every experience and not use her simply for what is convenient or expedient for the ward to relieve the head nurse of routine duties.

The first group: (7-9) (1-7) will probably relieve the head nurse most frequently of responsibility, but it deprives the Senior nurse of:

1. Conferences with the Head Nurse.
2. An opportunity to attend medical rounds.
3. An opportunity to study, under supervision, ward administration.
4. An opportunity to obtain real knowledge of the sick patients.
5. An opportunity to attend classes without the rush and stress of heavy afternoon responsibility.

The second group: (7-11) (3-7) and the third group (7-12) (1-4) afford:

1. An opportunity for conferences with head nurses and to study ward administration under supervision.
2. An opportunity for attending medical rounds.
3. An opportunity to study and understand the care and progress concerned with the nursing of the sick patients.

The fourth group: (7-11) (7-11):

1. Affords all the advantages of morning hours on the ward.
2. Relieves the Senior nurse of many routine duties.
3. Gives her the real nursing responsibility of night duty during the most active hours with an opportunity of using initiative and judgment.
4. Gives her longer consecutive hours off duty for study and recreation.

The fifth group: (1-5) (7-11):

1. Desirable hours for a nurse who has had all the foregoing experiences and is desirous of obtaining some initiative in her work.
2. Affords a long morning off duty with an entire freedom from daily routine.

It is apparent that each grouping of hours has varying advantages and disadvantages, and the head nurse whose desire it is to assist in the education of the student nurses under her will without hesitation study not only the needs of the ward, her own personal comfort and ease in management, but rather how things can be adjusted to give the broadest and fullest experience afforded on her ward to the student nurse for whose education in no small measure she is responsible. It is, therefore, apparent that the head nurse who continuously posts her Senior nurse on duty without variation of hours does so because it is the easiest and most comfortable thing for herself and she is not giving a serious consideration to what will provide the most complete and comprehensive experience for the student. She should vary her own hours on duty, if necessary, to afford every opportunity available.

What is true in arranging the Senior students' hours on duty is true also in arranging the hours of the Intermediate and Junior students. No student nurse should be kept for weeks on continuous hours or duties because she has learned to do certain clerical or routine things skillfully and well; for example, the giving of medicines, charting, the taking of temperatures, etc. Yet this is done continuously because, for the head nurse, it is the line of least resistance and for the student nurse, who may not realise in the fullest measure the need for a change, a pride in continuing in the thing she knows how to do well and a reluctance to undertake new tasks.

In planning the hours of the Junior student, it is frequently observed that little real thought beyond the need of the ward is given to either her duties or their supervision. She it is who is often put on 7-11 evening duty. These hours, it seems, are often the most responsible of the day. Fewer supervisors are on duty, the head nurse is rarely available, and usually the medical staff is depleted during these hours. Here it is that the Junior nurse is left to decide things for herself before her experience will warrant good judgment. During these early evening hours, the opportunity is afforded for most expert nursing and the comfort of the patient for the entire night is dependent largely on what is done or left undone at this time.

The Junior nurse should be given these hours only as an assistant and never as the nurse in charge, as is frequently arranged. This student needs all the supervision and teaching that can be given her and should be on duty as far as possible when the head nurse is on duty also; but observation proves that head nurses, when left to themselves to post hours, frequently see that the most expert service is available when they themselves are on duty without consideration as to whether or not it is to the advantage of the student nurses.

When changes are made in the personnel of any ward, it is poor judgment to post any nurse, Senior or otherwise, on duty, on hours when she will have entire responsibility of the ward in the care of the patients or in the administration. She does not know the patients, and a nurse is always at a disadvantage under such circumstances. It is never fair to a nurse to keep her on duty for two hours in the morning during the busiest period and send her off to return for the entire afternoon with responsibility of the ward, having had no conference with her concerning it. It is for such reasons mistakes occur and errors of judgment are made which are altogether unnecessary if forethought had been used in planning. The head nurse's responsibility is not to administer in the easiest, but in the best way, even if it be at inconvenience to herself. She must always remember that she is the person employed by the hospital to hold the responsibility and that the nurses under her are students to whom we owe a nursing education and that as a salaried person employed for a specific purpose it is her responsibility to adjust herself to the needs of the ward rather than to adjust the Student nurses to her needs and the needs of the ward, therefore making their education a secondary consideration. The arranging of nurses' hours for duty on the wards of the hospital is a matter which requires the greatest amount of thought and consideration.

(*The discussion of conferences will be continued in the July issue*)

SUMMER COURSES, INSTITUTES, AND CONFERENCES

California: Stanford University, June 30-July 28. (See May *Journal*, page 632.)

Massachusetts: Boston.—Harvard Medical School offers a course in Physical Therapeutics, July 5 to August 15. This course is designed to furnish advanced instruction in the various branches of Physiotherapy Massage, Therapeutic Exercise, Electrotherapy, and Hydrotherapy. Students making application for the course must have previous fundamental training and practical knowledge in either Nursing, Physiotherapy, or Physical Education. Instruction will consist of lectures and clinical observation at the Boston City, Massachusetts General, and Peter Bent Brigham Hospitals. Course limited to thirty students. For rates and detailed information, apply to Graduate Office, Harvard Medical School. Cambridge.—The Massachusetts Institute of Technology offers summer courses in Public Health and Health Education, July 10 to August 11. 1. Methods of Teaching Hygiene and Public Health in the Public Schools. 2 Personal Hygiene and Nutrition. 3. Sanitary Science and Public Health. 4. Elementary Bacteriology. 5. Bacteriology. 6. Public Health Laboratory Methods. Apply Massachusetts Institute of Technology, Cambridge, Mass.

Michigan: Ann Arbor.—The University of Michigan will offer a four months' course in Public Health Nursing, June 23-October 20. The course will be given under the direction of Mrs. Barbara H. Bartlett. Courses will be offered in Psychology, Sociology, Public Speaking, Hygiene and Sanitation, as well as Principles of Public Health Nursing. The field work will be given in Detroit at the Delray Health Center in cooperation with the Department of Health and Visiting Nurse Association, and will also include two well organized counties. Registration days are June 23 and 24, in Room 329, Science Building, University of Michigan. Monday, June 26 classes begin. August 15 the theory ends at the University. By October 20 theory and practice are completed.

New York: Albany.—The Hudson Valley League of Nursing Education has arranged an institute, June 5-10. Talks on the Principles of Education will be given by some one from the field of general education. These will be followed by the application of the principles to the education of the nurse. Classes will be taught and ample opportunity will be afforded for discussion. Following is the programme which has been arranged: June 5, Principles of Education, Principles of Teaching Applied to Teaching of Nursing. June 6, Organization of Schools of Nursing, Principles of Education, Teaching Pupils How to Study, Teaching of Class in Nursing. June 7, Discussion of Teaching of Class in Nursing, Principles of Education, continued, Principles of Teaching Applied to the Teaching of Sciences, Teaching of Class in Anatomy and Physiology. June 8, Supervision, Principles of Education, continued, Standardization of Equipment, followed and illustrated by trip through hospital. June 9, Formation of Classes,—Class Schedules—Records, Supervision of Home Life and Social Activities, Teaching of class in solutions followed by discussion. June 10, Need and Use of Reference Library. New York City.—The Department of Nursing and Health, Teachers College, Columbia University is planning a special conference on School Nursing during the fourth week of the Summer Session, July 21-August 4, inclusive. Dr. Josephine Baker of the Bureau of Child Hygiene, New York City Department of Health, Dr. David Snedden, Professor of Educational Sociology, Dr. William H. Kilpatrick, Professor of Education; Mabel Carney, Professor of Rural Education, and Dr. Jesse Williams, Professor of Physical

Education at Teachers College, and other members of the faculty, representatives from the New York State Department of Education, and other experts in School Health work will assist in the programme. One hour daily will be spent in considering the school nurse's share in Health Education; another hour in the health supervision of the school child, outlining the most effective programme, considering results of past experiments; and a third hour in the routines of School Nursing work. Round table conferences will be arranged as needed. In addition to the regular students attending the summer session, a limited number of School Nurses within easy radius of New York City are invited to attend, and these securing admission cards from the Department will be admitted to all sessions of the conference. Further information may be obtained by writing to the Department of Nursing and Health, Teachers College, New York. Woodstock (Ulster County).—THE BYRDCLIFFE SUMMER SCHOOL OF OCCUPATIONAL THERAPY will be continued this summer by master craftsmen resident in Woodstock, under the direction of Bertha Thompson, who for the past three years has been a director of Occupational Therapy in Army and Public Health hospitals. The courses offered this summer have been planned especially to meet the needs of graduate occupational aides who feel that they want further technical training in one or more of the crafts. Instruction will be offered in the following: Leather Work, Weaving, Basketry, Woodcarving, Modelling, Pottery, Metal Work, Jewelry, Woodwork, Toy-making. Full information about the school may be obtained from Bertha Thompson, Woodstock, Ulster County, N. Y. Application should be made early, as the size of the classes will be limited. The school will open on July 6.

Ohio: Cincinnati.—AN INSTITUTE FOR PRINCIPALS AND INSTRUCTORS OF SCHOOLS OF NURSING will be given June 13-17, under the direction of the Ohio State League of Nursing Education. (See May *Journal*, page 651.)

Washington: Seattle.—THE UNIVERSITY OF WASHINGTON is offering a course in Training School Administration, June 21-July 26. (See May *Journal*, page 636.)

WHO'S WHO IN THE NURSING WORLD

XI. AMY MAY HILLIARD

BIRTHPLACE: Ossining, N. Y. PARENTAGE: American. PRELIMINARY EDUCATION: Public and private schools. PROFESSIONAL EDUCATION: St. Luke's Hospital Training School for Nurses, New York City. POSITIONS HELD: Supervisor of Operating Rooms and Clinics of Rush Medical College and Presbyterian Hospital, Chicago, Illinois; Directress of Nurses, Evanston Hospital, Evanston, Illinois; Assistant Superintendent of the School of Nursing, Grace Hospital, Detroit, Michigan; Superintendent of Nurses, Jackson Sanitarium, Dansville, New York; Superintendent of Nurses and Superintendent of the Hospital, New York Neurological Institute, New York City; Inspector of Nurse Training Schools, New York State Education Department, Albany, N. Y.; General Superintendent of Training Schools, Bellevue and Allied Hospitals, New York City; Superintendent of Samaritan Hospital, Troy, New York. AUTHOR OF: Many papers for meetings and articles for professional periodicals. MEMBER OF: The Board of Directors of the National League for Nursing Education, The National Committee on Red Cross Nursing Service, Washington, D. C.; The Nurse Training School Council, Education Department, Albany, New York. OFFICES HELD: President and Secretary of New York State League for Nursing Education; President, New York City League for Nursing Education; Chairman, Manhattan Local Committee Red Cross Nursing Service; Chairman, Mayor's Committee on Nursing, Council of National Defense, New York City; President, St. Luke's Alumnae Association, New York City; member of Board of Directors of New York State Nurses' Association.

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR
Director, Bureau of Nursing, American Red Cross

THE SCHOOLS OF NURSING IN THE OLD WORLD

III. THE POZNAN SCHOOL

POZNAN is the Polish name for the city which under the German occupation was known as "Posen." Here is located the second of the schools of nursing sponsored by the American Red Cross Nursing Service in Poland.

In the Poznan School the situation is so wholly different from that which obtains in Warsaw that comparisons are quite impossible, though the Warsaw School, with its advantages, could be likened to some of our eastern institutions of learning, while the struggling school at Poznan suggests some of our small western colleges. Difficulties that to less dauntless souls might have seemed insurmountable confronted the American nurses. In order to obtain the hospital affiliations which were regarded as indispensable they were compelled at the outset to take over the entire nursing care, day and night, of the hospital, averaging 40 or more patients daily, assume entire responsibility for all the hospital work, including the operating room, and with no assistance but that afforded by the new pupils and "nurse helpers" almost wholly untrained. The housekeeping,—laundry, dietary department, etc.—was taken over by the Catholic Sisters. The task of transforming the hospital, vermin-ridden, lacking in plumbing facilities, in linen, adequate dishes, trays,—equipment of every sort,—into one approximating American standards of cleanliness, sanitation, order and convenience was monumental.

The personnel of the Poznan School originally included Ita M. McDonnell, director of the Department of Nursing, a graduate of the St. Raphael Hospital Training School, St. Cloud, Minn.; Augusta E. Mettel, a graduate of St. Mary's Hospital Training School, Minneapolis, and formerly a public health nurse for the Polish Gray Samaritan Commission; Emily Skorupa, a graduate of St. Mary of Nazareth's Hospital Training School, Chicago. Mary Suchowska, of the original staff, a native Pole, left the first of the year to be married and was temporarily succeeded by Lena M. Johnson, a graduate of Wesley Memorial Hospital, Chicago. Marha M. Rhode afterward took Miss Johnson's place. Like Miss Skorupa, she is a graduate of St. Mary of Nazareth's. With the exception of Miss McDonnell all the nurses are of Polish blood and were chosen for their particular fitness for service in Poland.

The curriculum, hours of duty, requirements for admission, etc., are practically the same at both the Poznan and the Warsaw Schools. The ten pupils with whom the Poznan School opened are largely from families rich in traditions of culture and service to humanity. One is a doctor's daughter, one a doctor's niece, one a banker's daughter, one a University student just ready to take up the study of medicine, one a graduate of the Krakow School, a short course for native health workers, and one,—who has proved an invaluable asset, but over whose admission there was considerable doubt, because she was 42,—very much beyond the age limit,—is the wife of a physician. She lives with the pupils as one of them and because of her education, refinement and more mature age, she has been able to interest them in something besides their work when they are off duty.

The opening of the School took place on November 10, 1921. Mass was celebrated by Father Rader in the chapel of the hospital and after reading the Gospel lesson,—the story of the Good Samaritan, he preached a sermon especially applicable to the new school. The guests were given an opportunity to inspect the hospital, going later to the nurses' home at Ulica Grottgera where breakfast was served and addresses were given by representatives of the local organizations. Among the American Red Cross personnel present were Stella S. Mathews, Director of Nursing Service in Poland; Helen Bridge, Director of the Warsaw School of Nursing; Dr. R. M. Taylor, Director of the A. R. C. in Poland, and Mr. Philips, chief of the publicity department.

From the beginning an enormous amount of work had to be assumed by the American nurses and as a result very little time was left for preliminary training and much less for the practical training and supervision that are so highly desirable. Moreover the staff of four was diminished the first of the current year when Miss Suchowska left to be married. One of the American nurses had therefore to continue to do night duty for a considerable period of time until one of the pupils or another trained nurse could be found to supervise this work.

Miss Hay wrote after her recent tour of inspection:

> In view of the tremendously heavy burdens our nurses have carried from the first in this enterprise, it is most gratifying to find how much enthusiasm and interest they still have for the project. The force, however, is too small under the difficult circumstances. Miss Skorupa has given as much of the practical training as there has been time for. Miss Mettel is on night duty, she and Miss Skorupa alternating every few weeks. Miss McDonnell is handicapped in comparison by her inability to speak either German or Polish.
>
> The hospital is a most pleasing exception to the native hospitals one finds in some of the European countries and Miss Mathews states that the transformation is little short of marvelous. The patients are well cared for and happy

and perhaps no better indication could be given of the success of our nurses than is shown in the fact that the Catholic Sisters have not only been most coöperative but strongly endorse the work of the nurses and the good care these patients are receiving from the new pupils under their care and supervision.

I met a number of physicians interested in the hospital, including the chief of the railway service, the chief of the departments, medical and surgical. They were warm in their praises of the work the nurses had done and begged that they be left on long enough to insure the establishment of a good school. On the day I arrived at the nurses' home I met Dr. Zmiowicz, a woman physician, president of the Polish Red Cross and some others of the Polish Red Cross and University staff. They also spoke most appreciatively of the nurses' work and accomplishment thus far.

The pupils compare very favorably with the group at Warsaw, although the situation with them, as with the instructors, is so vastly different. In Warsaw there had been no hospital work at the time of my visit, consequently no chance for bodily weariness in the same degree. The Warsaw pupils, as I witnessed, know how to play as well as to work, but the pupils in the Poznan School have had too much hard and unusual work thrust upon them, together with lectures and lessons to have left any time or inclination for play or relaxation. This condition which obtained at the time of my visit we shall hope to change. The pupils, however, manifest the greatest interest and enthusiasm for their work, notwithstanding it has been so strenuous.

The home is attractive, although the pupils' rooms for the most part have been altogether without heat.[1] Extra rooms are being prepared in the adjoining apartment provided with stoves. The food is plain but ample.

Miss McDonnell has done most efficient work under extremely difficult circumstances. The hospital work and hospital care were there to be done and the cheerfulness with which these women have carried on is deserving of the greatest praise. It is a worthy undertaking and ought to prove a model for similar institutions where it is desired there shall be a good nurses' school and at the same time the Church be left in control of some of the hospital management.

GENEVA CONFERENCE

DELEGATES representing 34 different countries attended the second biennial meeting of the General Council of the League of Red Cross Societies held in Geneva from March 28 to April 1. In the absence of Henry P. Davison, chairman of the Board of Governors of the League, Dr. A. Ross Hill, vice-chairman of the A. R. C. in charge of foreign operations, presided. The American delegates included Helen Scott Hay, Director of A. R. C. Nursing Service in Europe; Ernest P. Bicknell, A. R. C. Commissioner to Europe; Robert P. Lane, European Director, Junior American Red Cross; Dr. A. C. Burnham, Medical Director, A. R. C. European Commission, and Dr. J. Mason Knox, Field Medical Director, alternate. Stella S. Mathews, Director of A. R. C. Nursing Service in Poland, was present by invitation.

The League has restated its programme for the next two years,

[1] This in a climate where the temperature remains for weeks at ten to twenty below zero!

which will be concentrated chiefly upon the development of public health nursing, popular health instruction and Junior Red Cross activities. The delegates unanimously agreed that these three fields relate most closely to the vital problems common to all countries.

Following an able presentation by Miss Hay of the importance of the organization of suitable schools of nursing as a fundamental preliminary to public health nursing, resolutions were prepared and presented urging the League to stimulate the organization of schools of nursing of the first order in the countries of their members' societies where such institutions were lacking.

Recommendation was made by Miss Olmsted of the permanent organization of the International Public Health Course in London with branches for the South American countries, perhaps in San Francisco or New York, inspection of the various fields where graduates of this course are at work, etc.

Efforts to standardize Red Cross nurses met with decided opposition and in the resolution finally adopted it was merely stated that the recommendation for definitely standardized professional training be looked into during the coming year.

Removal of the headquarters from Geneva to Paris was also decided upon for reasons of economy and accessibility, Paris being a more convenient meeting place for delegates from all parts of the world than Geneva.

In a most informing letter on her impressions of the Geneva Conference Miss Hay writes:

> It was felt on the whole that the meetings were thoroughly successful and the results obtained quite as much or more than had been anticipated. There was a good exhibit which included such photographs of our several nurses' schools as you have already received. There were all the social functions arranged for us that we possibly had time for. * * * Besides Miss Mathews and the two nurses of the League,—Miss Olmsted and Miss Ledyard,—the only other nurses present were Miss Perren of the C. A. R. D., and two visiting nurses, one, Miss Nathan, from New Zealand and the other from Holland.

ITEMS

Two A. R. C. nurses have recently been sent through the Paris office to the Near East Relief Headquarters in Constantinople. These are Elizabeth Hollenbeck, who sailed April 9 for the Caucasus, and Emily Petty.

Mrs. Betty McCreery and Mabel Clark arrived in Constantinople, April 1, and left for the Caucasus April 7. These also are Red Cross nurses recently assigned to the Near East Relief through the office of the A. R. C. Nursing Service in Washington.

FOREIGN DEPARTMENT

LAVINIA L. DOCK, R.N., DEPARTMENT EDITOR

MARIA ROBERTA—A TRIBUTE

BY DELLA V. KNIGHT, R.N., *Navy Nurse Corps*

SOMEWHERE, sometime, I hope to see published, where all the world may read, a fitting tribute to the Medical Department of the Navy for what it has done for the natives of Guam. The medical officers who were ordered to Guam immediately after this island became a possession of the United States found the natives in great need of medical and nursing care. Overcoming what seemed to be almost insurmountable difficulties, they established a hospital, and native women were instructed in the nursing care of sick women and children. First among the women who received this instruction was Maria Roberta.

Maria Roberta was born on the island of Guam about forty-five years ago. The world to Maria is the small island upon which she lives; and I doubt whether she has ever strayed from it, even in fancy. She has not had the advantage of a school education, but as a beautiful flower will sometimes be found growing in the most unexpected places amid the most unfavorable surroundings, so Maria Roberta grew, if not in physical beauty, (though her tall, well built, graceful form could be so considered) in beauty of character. Her keen mind, well developed sense of honor, all the gentleness and lovableness of the native, with a great desire to do for others, have made her an outstanding and valuable person on the island.

When I reported for duty here, in 1914, I found that the principal duty of the chief nurse was the instruction of, and the responsibility for, the native nurses. In a short time it became evident that in order to give the necessary nursing care to the native women and children who were patients in the hospital, and to provide a nurse for the dressing stations at villages distant from the hospital, more native nurses were needed. It seemed impossible to supply this need with desirable material. Upon inquiry I learned that many of the better class of native girls were willing, even anxious, to do this work, but there was an objection on the part of the parents. Guam having been a Spanish possession, some of the Spanish conventions were still adhered to by the better class natives, and parents would not allow their daughters to leave the confines of their homes unchaperoned. Not being able to, nor having a desire to change these conventions, it became clear that it would be necessary to first obtain a chaperon for the native nurses. Having heard much about Maria Roberta from

the nurses, there was no doubt in my mind that she was just the person for this place. I sent for Maria. She came to see me at the hospital and told me that she could not accept my offer as she had an adopted child to care for and the pay was not sufficient. (She had left the hospital some years previous to make a home for this child.) After discussing the matter with the Commanding Officer, he decided that out of the fund for the care of sick natives, Maria was to be paid a sufficient amount. Maria being well known on the island, the fact that she was engaged as "official chaperon" for the native nurses removed the objection of the parents to the extent that it became possible to get the required number of pupil nurses. Maria lived with the nurses, she was with them constantly while in the hospital and when they were off duty and wanted to go home, she accompanied them to their homes, where she was relieved of her responsibility by their parents, who returned them to the hospital not later than 10 p. m. This constant supervision was accepted very gracefully by the girls. They were very fond of Maria; they also knew that nothing stood between Maria and her duty.

One evening, just as we were sitting down to dinner, I heard footsteps on the walk at the entrance to the dining room and, looking out, I saw Maria Roberta with two shrinking forms of men, one gripped firmly in each hand. One was a native policeman in full uniform, club "'n everything" except his shoes, which he was carrying in the hand not held by Maria. She gave the policeman a shove into the dining room, then she gave the other man a shove, placing them before me, and told me that she had found these two men just outside the hospital wards talking to two of the native nurses, giving the names of the nurses. She had caught these two Romeos "red-handed" in a most glaring offense. I informed Maria that we would take them to the police station. The policeman, very meekly, asked permission to put on his shoes. This permission was granted, after which Maria and I proceeded with the two frightened, non-resisting offenders to the police station, where they were locked up for the night; and the next day they were tried and found guilty on a charge of trespassing. But in this South Sea island, with its balmy climate and its tropical beauty making it a veritable fairyland which seems to exude romance, and when the girl is young and beautiful, who can blame mere (native) man for trying to sidestep even a Spanish convention? Oh, yes, it takes a Maria Roberta's sense of duty to hold this convention intact, as the girls also are willing to do a bit of sidestepping on the matter of conventions. When little Francesca, who in appearance was like a bronze doll, was admonished for flirting, she responded: "But, Miss Knight, it is my custom." If any doubt as to Maria's

authority existed in the minds of the people prior to the above mentioned episode, no doubt remained following it.

Maria's field of usefulness is not limited to being "official chaperon" to the native nurses. Her ability to understand and speak English makes her services as interpreter in the instruction of the nurses and in transmitting orders most valuable. The instruction of the nurses is adapted to their mentality and to the needs of the people. A large part of their work is obstetrical nursing in which Maria is most efficient; and, knowing the customs and living conditions of the people, she was most helpful in adjusting the work to their needs. The training of Maria Roberta and other native women in the care of obstetrical cases was a great help to the medical officers in dealing with the question of the midwives of the island. When the Commanding Officer of the hospital ordered that all midwives pass an annual examination in order to keep their licenses to practice, there was much protest on the part of those who could not meet the requirements of the examination, which was entirely practical. This action on the part of the Commanding Officer resulted in a great decrease in infant mortality and blindness. Again Maria Roberta's usefulness became evident, in that she knew personally all the midwives, where they practiced, how they did their work, whether they were meeting in requirements set by the medical officers,—and to Maria these requirements were unconditional. She had a way of appearing just at a time to get first hand information, and,—well, the midwives knew that nothing stood between Maria and her duty. Knowing this, they respected her.

Not least among Maria's characteristics is her marked maternal instinct, which was demonstrated in her adoption of a child. Other children have been fortunate enough to be the recipients of Maria's great generosity. Among them is Benadino. When I reported for duty in Guam, Benadino was nearly three years old, and had been a patient in the hospital about two years, or so long that if he ever had any people who were interested in him, no evidence of this interest remained. He apparently belonged to the hospital, and was considered the hospital Mascot. He was a bright, cheery little fellow, a bit vain, and had the Chamorro love for bright colors. He objected to wearing the plain gowns provided by the hospital for children, and always found someone to encourage his vanity. On special occasions, Maria Roberta could always produce Benadino in gala attire, and it would be difficult to say whether Benadino or Maria derived the greater happiness from the effect.

Service conditions make frequent changes of the Navy personnel at this station. It is Maria Roberta who remains, and who holds together the fabric of the work built up by the Navy nurses.

DEPARTMENT OF PUBLIC HEALTH NURSING

A. M. Carr, R.N., Department Editor
National Organization for Public Health Nursing

MENTAL HYGIENE AND MUSTARD PLASTERS

By Frankwood E. Williams, M.D.
Associate Medical Director, The National Committee for Mental Hygiene

SOMETIMES one is helped in knowing what a thing is by knowing what it is not. As there are quite a few misconceptions about the term *mental hygiene*, it might be well, therefore, to point out some of the things it is not. Of course, *mental hygiene*, like anything else, is whatever anybody chooses to call it; no one can insist arbitrarily upon any particular definition of the term. Nevertheless, the psychiatrists who give most thought to this problem of public health use the term in a particularized sense and their conception of the term and the problem it represents is probably the safe one to follow.

While the problem represented by mental hygiene is an old one the term itself is comparatively new. The words *mental hygiene* were, so far as we know, first used in the title of a book in 1843 when William Sweetser published *Mental Hygiene: or an Examination of the Intellect and Passions.* Isaac Ray used it again in 1863 (*Mental Hygiene*), and D. A. Gorton in 1873 (*Essay on the Principles of Mental Hygiene*). It first came into use as a term in organized public health in 1909 with the organization of the National Committee for Mental Hygiene.

But there have been many changes in the conception of mental health since 1843; there were changes from 1943 to 1863, and very great changes from Gorton (1873) to White's *Principles of Mental Hygiene* (1917). There have been changes from 1909 to the present time—all of these changes representing a growth in our knowledge of the nature of nervous and mental disease and its significance, both personal and social. The term *mental hygiene*, therefore, has grown with the progressive development of the science of psychopathology and the art of psychiatry. Both psychopathology and psychiatry are dynamic, constantly changing and moving forward with the development of new knowledge; and mental hygiene, which represents these in the public health field must perforce keep moving forward with them. It likewise must be dynamic, changing its conceptions with each addition of new knowledge. To become static and fixed would end its usefulness.

And yet this is just where the trouble comes in. It is much more comfortable to be fixed and settled; and most people like above all

things to be comfortable. So it happens that a good many people have settled themselves down at some phase in the progressive development of mental hygiene unaware apparently that although they are modishly dressed in matters of antisepsis and vaccines and sera and infections they are in the bustle stage, so far as mental hygiene is concerned, or probably they may be even wearing the powdered wigs and breeches of the 18th century or, mayhap, waving veils in a Greek dance. Briefly, then, what are some of the things mental hygiene is not, what are the wigs and bustles?

A sound mind in a sound body. Mental hygiene is not alone physical hygiene. No one would urge any less attention to physical hygiene—but a sound body does not assure a sound mind; nor does an unsound body mean an unsound mind. True, also, that our physical condition bears some relation to our mental state (particularly if we include, as we should, some of the less obvious things such as the endocrines) but it does not follow that a physical condition raised to the nth power will raise one's mental stature. You being a nurse and I being a physician and both of us calling too much on our physical reserve and not, therefore, being in the best of physical condition would probably have a mental machine that ran with a little less friction if we attended a little more to our physical condition. And there are a good many in the world like us. But we should not generalize from that. This barely touches the fringe of our mental life and health and by no means comprehends the fundamentals of mental hygiene. And yet many have not yet passed this stage in their conceptions.

Why worry? Pollyanna. Smile. This is a sort of mustard plaster and hot water-bottle stage. Now mustard plasters and hot water-bottles have still their use in medicine and nursing. But they are no longer used blindly but with knowledge and for a reasoned purpose. If a friend suddenly developed a pain in the lower right abdomen one would not try to "jolly" him about it, to sing to him, take him to the theater to "divert" him, smile at him and tell him to smile back, or send him to Florida for the winter. One would probably make him comfortable in bed, give him an ice-bag and send for a physician. Worry and depression, like pain, are symptoms. Like all symptoms they have their cause and are only adequately removed when the cause is found and attended to. Now some of the causes are simple. Our friend may not have appendicitis. He may have eaten injudiciously. But it is well to know that fact. The cause for worry and depression may be quite conscious and apparent and "get-at-able." If so, the thing to do is to get at it—not to try to deceive oneself about it. Smiling and pretending do not solve the problem

and until the problem is solved how bootless to talk about not worrying.

The causes of some worries and depressions are not so obvious. I saw recently in consultation a university student who had had a brilliant record but who had recently become "worried" and depressed until work was impossible. It was all due, he said, to an overpowering fear that he would not be able to sleep. Should one have laughed him out of this; shown him how ridiculous it was; told him that under observation he was sleeping seven hours a night (he knew this and believed it); cheered him up; sent him home to "rest"? These are the things that are frequently done. Obviously the worry and depression were not over a fear that he could not sleep, although the boy was honest in giving this as the cause—it was as near to it as he could come. But the problem was to find for what fear this fear was a surrogate. It happened not to be a very difficult thing to do in his case; the cause of the trouble was found and the boy has now regained his place in his class.

Of course, this making "glad games" of problems, of pretending and smiling is on the assumption that worries and depressions and other symptoms of nervous and mental difficulty are all imaginary, while the actual fact is that most "nervous" persons have too little rather than too much imagination. Imagination is a very rare quality in human make-up and the world suffers sadly from the lack. Nervous difficulties are quite real difficulties and have very real causes. Pretending about their symptoms gets us nowhere.

From the scores and scores of books of the "don't worry" type issued annually, and evidently sold, the general level of popular knowledge on the subject of mental hygiene is about at this point.

Intelligence. More recently there has been a great deal of interest in the measuring of intelligence. By means of standardized tests it is possible to determine what an individual's intellectual potentialities may be. This is an important step forward. The development of the psychological tests of intellectual ability are as important in education as some of the epoch-making discoveries have been in the field of medicine. We have always known that there were "fools," "dullards," and "slow-wits" as well as "geniuses" in the world; but except to complain of the dullards and envy the geniuses we have never done very much about it. It has been obvious for some time that not all children, for example, did equally well in a formalized school curriculum. The product that has been turned out by the schools has been very uneven. It has been our tendency to assume that the method of education was all right and to blame the individual for not taking advantage of his opportunity. That he didn't we have been

inclined to lay to his "laziness," lack of "interest" and more or less general "cussedness." The psychologists are showing us, however, that we are not all born with equal intellectual endowment; that there are grades of intellectual ability; that one's potential intellectual ability is pretty much a fixed thing—that with proper methods it can be developed to its full extent, but not past that point; that educational methods cannot be made along the lines of an arbitrary standard but must be flexible to accommodate the various grades of ability.

In their proper field it is difficult to overestimate the importance of the psychological tests of intelligence—when properly standardized tests are used by properly trained individuals; but there is a tendency to much overrate the significance of these tests so far as life itself and conduct are concerned. There are those apparently who would give a boy or girl with a high I. Q. (intelligence quotient: the relation between the individual's actual age and his intellectual age) a certificate for worldly success, if not for Heaven. Those with high I. Q.'s are said to be the "future leaders of the world." Some of them, no doubt, are, but as a general statement one may surely question it. One wonders where those of the last generation are who had high I. Q.'s—are they the present "leaders of the world"?

Ability to get on in life is certainly not wholly dependent upon intellect. Past a certain point one questions how much intellect has to do with it. The difficulties that you and I have with our jobs is probably not due to the fact that we haven't sufficient intellect with which to manage the jobs; there would seem to be other factors involved. It is one thing to have potential ability and quite another to be able to use it. There are a number of handicaps that may impede the progress of the lad with a high I. Q. As a matter of fact there is very likely to be associated with a high I. Q. a number of elements that are pretty sure to be handicaps for the individual. The converse is equally true. A low I. Q. is not a warranty of failure. The intellectual heights to which such an individual will climb are certainly limited, but there are frequently in the personality make-up of such an individual elements that compensate for his lower intellectual ability and carry him towards a successful citizenship and the general "rewards" of this life as they are now usually conceived.

In our generation the "good" boy and the boy who was "good to his mother" were looked upon with great favor. We still believe in boys being, well, at least reasonably good, and in boys being good to their mothers, but our knowledge of the "good boy" is considerably greater than it was, so that his station is no longer considered unimpeachable. Just now the boy with the high I. Q. is extolled. But as we learn more of this boy I am inclined to think that he will

eventually take his place in relative importance to the rest of things with the "good boy" of our generation. The intelligence test is an important element in a modern conception of mental hygiene, but the whole of mental hygiene cannot be expressed in its terms.

Mental hygiene—behavior. Mental hygiene is interested in behavior. It is interested in your behavior and mine, in the behavior of the individual with a neurosis, in the behavior of a patient with a psychosis. It is interested in the behavior of the child at school (with low or high I. Q.) particularly if the child is failing; in the truant, the juvenile delinquent, the first offender and the individual who, mayhap, is serving his third or fourth term in a correctional institution. It is interested in your fear of a mouse, although that may not be socially important, and the paralyzing fear of the one who dares not cross a street or ride in a subway, and the fear of the patient at the content of his hallucinations. It is not alone interested in describing symptoms nor merely in the alleviating of symptoms except insofar as both these may be steps in coming at the fundamental source of the difficulty. It is interested in the physical, intellectual, emotional and social factors that tend to determine conduct and particularly those factors that may have much to do with the determination of conduct without the individual being aware of them.

One is not just "good" or "bad" or "happy" or "sad" or "successful" or "unsuccessful," "efficient" or "inefficient" and "that is an end on it." Such an attitude wears a bustle and rides in a horse car. Internal medicine, physiology, psychology, neuropathology and psychopathology are drawing in on this problem of success or failure and mental hygiene attempts to assemble the material that comes from these various fields of investigation to synthesize it and to make it socially useful by putting it to work. As in all other fields of health there is much that we do not know; there is much that we are rapidly coming to know, but about which we must reserve judgment for the present until it can be further studied, checked and rechecked; there is a very great deal that we do know that is both individually and socially useful. It is this knowledge that mental hygiene would put to work both that nervous and mental illness may be prevented (fifty per cent of the patients in hospitals for mental disease need never have come there had their difficulties been recognized for what they were and been properly handled in the beginning) and that all of us may live fuller and happier lives because of a better understanding of those forces within our control—through knowledge, not "will"—that tend to upset and disturb us. There is no "royal road" to this knowledge—"eat an apple a day and keep the doctor away"—but any intelligent person who chooses may gain it.

HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

ALICE SHEPARD GILMAN, R.N., DEPARTMENT EDITOR

CORRELATION OF THEORY AND PRACTICE IN SCHOOLS OF NURSING

BY ETHEL HYDE, R.N.
Evanston, Illinois

[In view of the constant difficulty which we, as heads of Training Schools, experience in obtaining head nurses who feel their responsibility as teachers to the student nurse, we are publishing this paper by Miss Hyde which was read before the Chicago League of Nursing Education.

Our supervisors should realize more fully that the preliminary course teaches only preliminary subjects and does not cover all the practical procedures that the student nurse must learn nor does it eliminate the need for careful supervision of all nursing procedures. *Esprit de corps* and good nursing technique are the results, not only of good teaching, but of constant and very careful supervision. Miss Hyde's article is timely and practical.—A. S. G.]

I AM very happy tonight to have the chance to say to you what has been in my mind for the past three years. To those of you who know that I am an alumna of only two years, that statement may need explanation. Let me say, then, that as early as my Senior year in training I began to keep a little red book of "Inconsistencies" as I saw them. When a seeming inconsistency was cleared up it was scratched off. But there was, at graduation, a fair sized list that never was erased.

I believe that critical attitude typifies the attitude of the nurse today; I believe the undercurrent of unrest and dissatisfaction that permeated our entire nurses' group is present in an ever creeping tide in all present-day training schools. We may like it or not, we may wish to go back to the old type of school where discipline was severe and awe inspiring, but the fact remains—we have on our hands a different type of young women to train,—a young woman whose ideas are almost as syncopated as the music she adores—and unless we adapt our methods to this changed type we shall be left on the scrap heap.

To conserve, then, the best elements in the old systems and reclothe them with a new spirit—that attitude alone, will, I believe, carry us forward in this new era of nursing activity with any degree of success.

Accepting, since we must, this new type of young woman, understanding her psychology, we must necessarily alter some of our teaching methods. To hold her we must interest her and constantly

re-interest her until finally the sense of mastery of her profession will provide its own stimulus.

In the actual work of the training school only one thing supersedes in importance teaching of correct method. That thing is spirit. "Law keeping is not morality," says someone. Great as it is to teach a nurse how to do things rightly, there is a greater problem, namely, to make her want to do things rightly. But the prime subject under discussion tonight is not the moral one, but the practical one. I do not, however, admit that there is any distinct dividing line between them.

I have divided my thoughts roughly into three groups which, for want of better title, I will call: 1—Choosing your heads; 2—Running the ward "together"; 3—Definite problems of correlation.

As to the first, my belief is contained in two sentences: (a) One should choose a teacher who has been a head nurse; (b) One should choose a head nurse who can teach.

More or less the present attitude toward the head nurse and the instructor is that in the class room the ideal method is *taught* but that in the stress of emergencies or the pressure of daily work on the floor, a second best method is *used*. Do you not think that if the so-called second-best method is a time saver it should be the one taught? Are we to have a sort of company or dress technique when we have more time and a less "frilly" one when we have more work? Yet every one here has heard older nurses say to younger ones, "Oh, you won't fuss like that when you get to Ward H. or G." Is this a real criticism then of a too elaborate technique? Or does it only mean that the nurses do things in a slap dash, get it over, fashion when pushed for time? Are instructors taking account of emergency or short time methods in their teaching? If so, why do so many nurses lose their heads when emergencies come and seek vainly to remember "how it was taught"? Also, have we not attached too much disrepute to the substitution of any piece of apparatus, say, in a treatment? I am not upholding laxity in using proper equipment, but I am acutely mindful of the raised eyebrows of my own head nurses when a piece of bandage on a bottle top was started left instead of right, or a connecting tube was one-eighth of an inch larger in diameter than had been used for the last ten years. A case in point occurred recently. A new graduate, an excellent one, too, when confronted in a home with a scarcity of equipment searched for some time for a salt dip in which to fix an hypodermic and finally used the top of a perfume bottle. It never occurred to her that any substance other than glass would work.

On the other hand, the average head nurse is too little in sympathy with the class room. Her attitude is "If Miss So and So could

come up here and see things as they are,—" Am I not right? How far can she further or supplement the class room, should be her attitude.

I think we head nurses *talk* at pupils too much and work with them too little. Back in kindergarten days the acted lesson was the only thing that held. Its power as a memory strengthener is still potent. How many nurses know the awkward feel of getting something off a table too close to the bed? Have you ever taken a nurse in an unoccupied room and tried the thing out with her? Have you ever made your diet nurse drink a glass of lukewarm water or eat a cold potato?

The average young pupil nurse comes on to the wards alive with enthusiasm. Her technique is awkward, she is slow—but she improves rapidly. Then comes a slackening, she cuts corners unless she is very unusual. It is here that the head nurse must come in to re-kindle interest.

This brings me to my second point—the secret of the thing to my notion is "Running the ward together." Why not? It's the same principle as profit sharing,—here it's responsibility sharing. May I suggest a few points?

1—Everyone must know the diagnosis of every patient and points in their recovery. A morning talk of five minutes will do this.
2—Head nurses must be ready to explain terms,—in fact, must seek out such chances.
3—Cases of a kind must be related to the individual variations pointed out. Ward clinics are used all too little.
4—Encourage pupils to ask questions of doctors.
5—Arrange for older nurses to make rounds with doctors.
6—Arrange for as many as possible to see an interesting dressing or unusual treatment.

In the business of a coöperative attitude there is all the place in the world for mutual respect, but I see no place for "fear." The older time "Tartar" of a head nurse is no longer either desirable or, in the higher sense, efficient. The influence of fatigue on the morale of the nurse is not to be overlooked. When the fatigue point is approaching, it is time for the head nurse to actually put her shoulder to the wheel.

I want to suggest several questions for discussion as my third point:

1—How far should the instructor follow up work on the ward?
2—How much can the spirit of competition accomplish? Associated with this is the question of class standing, publicly posted at the end of given periods. Senior demonstrations before the entire school and, if possible, the staff doctors, come in here.
3—How much help can older nurses give in training younger ones? Is class distinction necessary to accomplish this?

4—Can a pupil nurse outline her day's work successfully? How about individual conferences with the head nurse?

5—In line with this, could the entire group of nurses on a ward meet in conference to any advantage? Would the frequent changes we have, make this impossible?

6—Would anything be gained by having the newly instructed nurses sent out to give treatments, even before they become incorporated in the routine of baths and trays? Would they get their habits of technique formed more quickly because of this early chance to practice?

7—Would it be feasible to have a very young nurse on call for running errands and cleaning up after accidents and emergencies? Would she learn anything about what is of primary and what of secondary importance and be less apt to lose her head when the responsibility in such cases came directly on her?

8—Why do we leave our lessons in costs and economy to the senior year? Could competition between floors keep the overhead down?

9—How shall we abolish "I think" and establish "I know"?

RED CROSS PIN PROTECTED BY CONGRESS

THAT the protection of the Red Cross symbol by Act of Congress has been both necessary and efficacious is demonstrated by the recent arrest in New England by Department of Justice agents of a woman who had been posing as a Red Cross Nurse in a private hospital. Not only had this woman obtained employment, but had succeeded in raising funds by the false claim of overseas service with the A. R. C.

It cannot be too emphatically nor too often repeated that the wearing of a Red Cross pin by a nurse not enrolled in the Red Cross Nursing Service is contrary to law. The Congressional ruling on this matter is as follows:

"It shall be unlawful for any person within the jurisdiction of the United States to wear or display the sign of the Red Cross or any insignia colored in imitation thereof for the fraudulent purpose of inducing the belief that he is a member of or an agent for the American National Red Cross.

If any person violates the provisions of this section he shall be deemed guilty of a misdemeanor and upon conviction in any Federal Court shall be liable to a fine of not less than $1.00 nor more than $500, or imprisonment for a term not exceeding one year, or both, for each and every offence."

THE NURSING COUNCIL OF THE PUBLIC HEALTH FEDERATION CINCINNATI—RECRUITING CAMPAIGN

As a part of the general campaign for nurse recruiting, the Nursing Council of the Public Health Federation, made up of representatives of the seven nursing training schools in the city, as well as representatives from all of the organizations employing public health nurses, extended an invitation to visit the training schools to all of the Junior and Senior students in the high schools. In response to the invitation, 514 visits were paid to the nursing training schools during two weeks. Very few of the girls registered to visit only one training school, a large majority signing up to visit two and three and a few, the entire seven. On the whole the response was more enthusiastic from the Junior students than from the Senior, this probably being true because of the fact that Seniors have so many other interests at this time of the year. It will be interesting to note the results of this effort and its effect upon the registration on the training schools of the coming year.

LETTERS TO THE EDITOR

The editors are not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer to insure publication.

WHY NOT ADD A MOVING VAN?

DEAR EDITOR: For the last few years the great question has been, "Why won't girls take training for nursing?" In looking over State Board Questions and Answers, (Foote) we found the answer to this question. "Question: What articles should a nurse take with her to a maternity case? Answer: In addition to her ordinary supplies, clothing, douche bag, rectal tube, hypodermic, etc., used in any case, the nurse should carry"— (a list of 29 articles is given). We find through this list of articles only two necessary things missing: the delivery bed, the gas tank.

Illinois — M. H. AND E. J.

THE IMPORTANCE OF OUR ALUMNAE ASSOCIATION

DEAR EDITOR: (Quoted in part from an article written for an alumnae bulletin). There has been a marvellous widening of the nurse's horizon in the last decade. A few years ago the new graduate was confronted with two alternatives, a hospital position or special duty. A hospital position meant poor pay and frequently inferior food and shelter, while the special nurse was often on duty twenty-one out of the twenty-four hours. Today the wideawake, ambitious graduate finds herself bewildered by the various opportunities spread before her. Pause for a moment and consider who is responsible for this re-birth of the nursing profession,—the nursing associations among which is your alumnae. Perhaps you are thinking, "Fine, but don't bother me, I am tired at night and can't be bothered with attending alumnae meetings." Purely selfish, but let us consider it from that viewpoint. We are taking it for granted that you belong to your alumnae, for a nurse of the present day who does not is given little consideration in the nursing world. When you apply for a position, the first question put to you is, "Are you an R.N.?" The next step will be a letter to your alumnae association. If you have not kept in touch with your alumnae, it is almost impossible for the Executive Board to give you a fair recommendation, although they have the most kindly feelings. They are busy women, who have not the time to investigate the very excellent work you may be doing. Consequently you get a mediocre report, when there is no reason why you should not have an excellent one. Again, a call comes to the Association for a teacher, a superintendent, or a director of public health. These positions frequently go unfilled, because the Executive Board is not familiar with what the different nurses are doing, with what they would like to do, or with what they are capable of doing. In fact the nurses, themselves, cannot know what they want to do unless they attend their Association meetings, and become familiar with what is going on in the nursing world. Even those who are satisfied with their work, and have no desire to change, need the stimulus to be gotten by rubbing shoulders with their fellow workers. It is not only that you need your Alumnae, your Alumnae needs you. The various Alumnae are run by too few people, not because these few wanted to, but because there is no one to take their place. Perhaps you feel that you cannot accept an office, that you have not the time to give. You may not, but you certainly can encourage and assist those who are giving their time by attending the monthly meetings, and by bringing to those meetings questions of interest. Above all, express yourself. An honest stiff argument is never injuri-

ous, it is inertia that kills. In the nursing world today there is no room for the laggard. You are compelled to keep up with the procession, or make room for some one else. It is up to you whether your alumnae association is to be one of the "trail blazers" in advancing the profession of nursing, or simply a "trailer."

I. G. F.

Maryland

A PLACE FOR THE PRACTICAL NURSE

DEAR EDITOR: Hi yi yi! what a stir that *Pictorial Review* article has made! A writer in *The Trained Nurse* is fairly foaming at the mouth about it. She cites a case of a practical nurse who was receiving seventy dollars a week for her services. Yes, and we have heard of a man riding Niagara Falls in a barrel. Fortunately he was the exception, and not the rule. Are practical nurses mercenary? What about the practical nurses who took up the ashes, tended the fires, washed dishes, washed and ironed, and sat up many nights with their sick neighbors, actuated by no other motive than compassion? What of the host of brave mothers who have brought their loved ones safely through critical illnesses? I am not "slamming" the trained nurse. I regret often and deeply that I have not had the hospital training. I am, however, making a next best substitute with earnest effort, untiring study, a passionate love of my work, exquisite cleanliness, and above all, a deep love for humanity. I have learned many things from kindly doctors and trained nurses: the use of the thermometer, the catheter, hypodermic needle, etc., and I am mighty glad to pass this knowledge on to anyone else who really loves the work and is naturally equipped for it with cheerfulness, neatness, and kindliness. A dear old paralytic lady, who had but a few days to live said to me in tremulous tones, intense with appreciation: "There is comfort in your voice." That's what we want in the profession, "comfort in the voice," as well as a knowledge of hypos, dietetics and anatomy.

M. P. A.

Pomeroy, Pa.

A NOVEL VACATION FOR A NURSE

DEAR EDITOR: Two years ago, in the early spring, after a strenuous winter spent largely in catering to the whims of private patients, I was looking through the pages of a popular magazine and was much attracted by a number of alluring advertisements of summer camps for boys and girls. I noticed in several of these the item, "resident nurse." Now one of the most cherished ambitions of my younger days has been to spend the summer as a camper at one of these playgrounds, but the state of my family's finances had never permitted me to realize this dream. But now, why not go in the capacity of camp nurse? This sudden inspiration filled me with such joy that I could scarcely control my emotion, for I was yet young and the anticipation of a summer in the open was almost too much. The financial reimbursement might not be equal to my usual income but, after all, was not health my best asset? and could I conserve it in a pleasanter way than this? Knowing nothing of the comparative merits of the camps, I determined to investigate thoroughly before attaching myself to any. I composed a carefully worded letter, stating my professional qualifications, expressing my love of young people and of out-door life and offering my services as camp nurse at a moderate salary. A typed copy of this letter, with a copy of a recommendation from the superintendent of my training school, I forwarded to the directors of a number of camps which I had selected because of long establishment, location, and personnel. In a few days I was showered with camp booklets and requests for interviews. It was not long before I had signed a contract for a nine weeks' engagement as camp nurse for a well organ-

ized girls' camp in Vermont. How happy I was as I hastened to collect my outfit, for a white uniform would be quite out of place and I was to wear the regular camp costume of bloomers, middy and sneakers, and to sleep in a tent. Oh, joyful bliss! Although I had charge of the physical well-being of 125 girls, from 7 to 14 years of age, my duties were far from strenuous. At the opening of camp, each girl was given a physical examination by a physician. Only two or three of the whole number were restricted from the more severe camp activities. Their weights and measurements were taken by the physical instructor and myself at the beginning and end of the season, a record being sent to the parents of each girl. In almost every case the gain in weight, muscular development and general health was remarkable. A very good hospital, twenty miles away, cared for the only serious cases we had,—one of sub-acute appendicitis, requiring operation, and a fracture of the radius. Numberless cuts and scratches responded readily to applications of iodine, while colds were almost unknown in spite of wet feet and hikes in the rain. In fact, the two beds in my hospital shack remained almost deserted all summer long and this lack of patients gave me ample time for sports of all kinds. Short talks on First Aid and Personal Hygiene were given from time to time. That summer was one not soon to be forgotten. The invigorating air, long horseback rides through woodsy trails, cool swims in the lake, canoe trips, a night on a mountain top, rolled in blankets, 'neath the starry heavens, the comradeship of girls and councillors, all filled me with a content I had never known before. When I returned to the city in the fall,—brown, firm of muscle, the red blood of health and vigor coursing through my veins,—my one regret was that more nurses could not have enjoyed the same privilege. Although such opportunities are somewhat limited in number, I cannot too strongly recommend a similar vacation for any nurse who loves youth and nature.

New Jersey L. R. T.

JOURNALS ON HAND

MRS. EDITH NORRIS SWAIN, 220 Chilton Street, Elizabeth, N. J., has the JOURNAL from December, 1918, to December, 1921, which she will send to any one paying the postage.

Ruth Brewster Sherman, 219½ East North Avenue, Baltimore, Md., has volumes I to X, inclusive, of the JOURNAL, bound in dark green cloth, perfect condition. Price, $5 and expressage.

Edna Flanagan, Abilene, Kansas, offers the following numbers of the JOURNAL: 1916, June through December; 1917, January through September; 1918, January, May, June, August, November and December; 1919, 1920, and 1921, complete.

The National Committee for Mental Hygiene, 370 Seventh Avenue, New York City, has recently prepared a list of its publications which it distributes. It has also prepared a brief list of carefully selected books treating of mental hygiene.

NURSING NEWS AND ANNOUNCEMENTS

ECOLE FLORENCE NIGHTINGALE
American Nurses' Memorial, Bordeaux, France, in Process of Construction

THE SEATTLE CONVENTION

The convention of the American Nurses' Association, the National League of Nursing Education, and the National Organization for Public Health Nursing will be held in Seattle, Wash., June 26-July 1, 1922.

Arrangements.—Meetings will be held in the Plymouth Congregational Church. Headquarters will be at the Young Women's Christian Association, near by.

Hotels.—The Committee on Arrangements urges all nurses who plan to attend the convention to make their arrangements through their committee, writing directly to Margaret Rice, Placement Bureau, Room 4, Y. W. C. A., Seattle, Wash. In making application for a room, the following items of information should be given: Name, address, price of room desired, whether the room may be shared with one or two others, time of arrival, route coming and going, probable length of stay. Those who wish to make their own arrangements should consult the list of hotels published in the May *Journal*. The Placement Committee can arrange dormitory accommodations for groups of nurses who wish to keep expenses as low as possible.

Side Trips from Seattle.—There are various side trips from Seattle which may be made directly after the convention, but which should be arranged for in advance. Rainier National Park may be reached by automobile from Seattle and should be given at least two or three days. A shooting tournament is to be held on Mount Rainier July 2-4. This will add to the attraction of the trip, but it will also mean a demand for rooms. Other trips are those to Snoqualmie Falls, to Green River Gorge, to Victoria, Vancouver, and to Portland, while Anyox, B. C. and Alaska will attract others. For details, write to the Arrangements Committee, (May S. Loomis, Chairman, City Hospital, Seattle), or to the Waterhouse Tourist Agency, 1616 Second Avenue, Seattle.

SPECIAL INVITATIONS TO DELEGATES

California.—The California State Nurses' Association, the State League of Nursing Education, and the State Organization for Public Health Nursing will hold their annual conventions in San Jose, one week before that of the biennial convention of the American Nurses' Association. June 19-21 has been selected for the exact dates, and nurses traveling through California for Seattle can plan to come a week sooner and take in the Conventions of the California nurses. San Jose is situated in the center of the beautiful Santa Clara Valley, about fifty miles from San Francisco, and is on the main line (Coast Route) of the Southern Pacific railroad. California extends a hearty welcome to the nurses to stop over for the State meetings. Los Angeles.—The members of District 5 invite all eastern nurses who attend the Seattle convention to visit southern California on the way to or from Seattle. Headquarters will be maintained at a central location for a week following the convention where visiting nurses will be assisted in planning sightseeing trips.

Oregon: Members of the Graduate Nurses' Association extend to the nurses attending the Seattle convention a cordial invitation to include Oregon in their western visit, either before or after the convention. Headquarters office will be located at Room 411, Oregonian Building, Portland. Telephone, Automatic, 529,48.

Utah: The Utah State Nurses' Association is very desirous of having nurses going to or coming from the convention at Seattle, whose route lies through Salt Lake City, stop off here. We have made arrangements to extend the courtesies of our city and state through a special committee who will be prepared to meet parties at trains, assist them in securing satisfactory accommodations while here, and offer suggestions and advise as to sightseeing trips. If parties contemplating stopping off here will advise either of the undersigned as to the time of their arrival and probable length of stay we will have someone on hand to receive them. Alice Hubbard, Secretary Utah State Association, Salt Lake County Hospital, Salt Lake City. H. C. Haines, Chairman Entertainment Committee, 1015 South 11th East Street, Salt Lake City.

TRANSPORTATION

The Transportation Committee of the three national organizations (R. Inde Albaugh, chairman, 370 Seventh Avenue, New York) has arranged a special trip under the auspices of the Frank Tourist Company, with the following itinerary: Leave New York, Saturday, June 17. Visit Montreal, Banff, Lake Louise, Vancouver, Victoria,—reach Seattle Sunday, June 25, 9:30 p. m. Returning there is a choice of three trips: *First*, Leave Seattle, July 1, midnight, visit Portland, San Francisco, the Yosemite, Salt Lake City, Colorado Springs, Chicago, arrive in New York July 17. *Second*,—Leave Seattle, July 1, visit Glacier Park, St. Paul, reach New York, July 8. *Third*,—Leave Seattle, July 1, visit Yellowstone Park, St. Paul, reach New York, July 11. Arrangements may be made by any one interested to join these parties. For rates, schedules, etc., address Miss Albaugh or the Frank Tourist Company, 489 Fifth Avenue, New York.

New York State Trip (Mrs. Julia W. Kline, chairman, 546 Rugby Road, Brooklyn, N. Y.) A special train will leave New York on Monday, June 19, visiting Chicago, St. Paul, Banff, Lake Louise, Vancouver, reaching Seattle, Monday, June 26, 7:30 a. m. Return, choice of two trips: *First*,—Leave Seattle, July 1, 11:15 p. m., visiting Portland, San Francisco, the Yosemite, Los Angeles, Salt Lake City, Colorado Springs, Denver, Chicago, reaching New York, July 13.

Second,—Same as the first as far as San Francisco, then Salt Lake City, Yellowstone Park, Colorado Springs, Denver, where the two portions of the party are united. For rates, schedules, etc., address Mrs. Kline, or the Worldwide Travel Service, 103 Park Avenue, New York. Anyone may join this trip.

Trip for Southern Nurses (Jane Van De Vrede, Director, 464 North Boulevard, Atlanta, Ga.). Leave Atlanta, June 19, visit St. Louis, Glacier National Park, reach Seattle Sunday, June 25, 8 p. m. Returning, leave Seattle June 30, 11:15 p. m., visit Portland, San Francisco, Los Angeles, the Grand Canon, Kansas City, St. Louis, reach Atlanta July 12.

Trip for the Central Division (Chairman, Minnie H. Ahrens, 308 North Michigan Avenue, Chicago). Leave Chicago June 20, visit St. Paul, Glacier National Park, reach Seattle Saturday evening, June 24. Returning choice of four routes. *First*,—By way of Yellowstone Park. *Second*,—Salt Lake City and the Grand Canon. *Third*,—Colorado Springs and Denver. *Fourth*,—The Canadian Pacific.

Trip for Western Nurses (Harriet Hart, Chairman, 963 Corona Street, Denver, Colo.). Nurses in Colorado and Nebraska who are interested in forming a Colorado party are asked to communicate with Miss Hart, stating whether they would like a side trip to Glacier National Park. Nurses from Nebraska would join the party at Alliance, Neb.

PROGRAMME

Saturday, June 24.—Meetings of Boards of Directors and of Committees of the three organizations.

Monday, June 26.—8-11 a. m., registration for all organizations, delegates and guests. 8-9 a. m., Advisory Council, American Nurses' Association. 8-9 a. m., A. N. A. round table, Reorganization (Sarah E. Sly). 8-9 a. m., League round table, Educational Function of the *American Journal of Nursing*, (Mary M. Roberts). 9-11, Business session, National Organization Public Health Nursing. 9-1, Business session, National League of Nursing Education.

2-4 p. m., Opening session of American Nurses' Association. 2-4 p. m., Meeting of Non-professional Members' Section, N. O. P. H. N. 4:30 p. m., Advisory Council of League. 4:30-6 p. m., Round table, Central Directories and State Headquarters, (Margaret Rice). 3:30-6 p. m., Round table, N. O. P. H. N. 5-6 p. m., Meeting of Nurses' Relief Fund Committee, A. N. A.

8 p. m., Formal Joint Opening Session. Invocation, Address of Welcome, responses by the three presidents, address by Annie W. Goodrich.

Tuesday, June 27.—8:11 a. m., Registration. 8-9 a. m., A. N. A. round table, Reorganization. 8-9 a. m., Round table, State and Local Committees, Red Cross Nursing Service, Clara D. Noyes presiding. 8-9 a. m., Round table, N. O. P. H. N. 8-9, League round table, Nursing in Communicable Diseases. 9-11:30, A. N. A. Private Duty Section, Frances M. Ott, chairman. Opening address, Clara D. Noyes. Nursing Problems in Maine, Mrs. Jane Provost, Registrar, Portland, Me. Private Duty Nurses as Educators in Venereal Diseases, Anne Doyle, U. S. Public Health Service. The Value of a Local Directory, Grace M. Cook, Registrar, Indianapolis, Ind. How Can We Counteract the Prevailing Tendency to Commercialism? Annette Fish, Waltham, Mass. Five-minute discussions from the floor. 11:30-12:30, Business session of Private Duty Section. 9-1, League Session in charge of Committee on Education, Isabel M. Stewart, chairman. 9-1, N. O. P. H. N., Section meetings. Tuberculosis Section, Mary A. Meyers, Indianapolis, presiding. Business. Report of sub-committee on Standards for Tuber-

culosis Nursing, Grace L. Anderson, St. Louis. Resume of the Nursing Section of the National Tuberculosis meeting, Anna M. Drake, Des Moines, Iowa. The Importance of Both Theoretical and Practical Training in Tuberculosis to Student Nurses, Grace I. Holmes, Portland, Oregon. General discussion. Election of officers. School Section. Child Welfare Section. Industrial Section. Chairman of each section presiding. Business one hour. Programme remainder of time.

2 to 4 p. m., A. N. A., N. L. N. E., and N. O. P. H. N. Joint Session for lay public, Anne W. Goodrich presiding. Presentation of Nursing as a Profession to and Its Reception by the Public, Carol L. Martin, Central Council for Nursing Education, Chicago, Ill. The Relation of Nursing Education to Community and National Welfare, Clara D. Noyes. The Ideals of the Nursing Profession for Schools for Nurses, Carolyn E. Gray, Cleveland, Ohio. The Necessity of Gaining the Public's Coöperation for Nursing Education, Henry Suzzallo, President, Washington State University. 4:30 to 6 p. m., A. N. A. Round table, Ada Belle McCleery, Illinois, presiding. How Shall Hospitals Meet Their Present Nursing Obligations and Educational Responsibilities to Their Schools of Nursing, Alice Shepard Gilman. Discussion, opened by Carrie M. Hall. 4:30-6, League round table, Value of Institutes for Administrators and Instructors of Training Schools, Laura R. Logan, Ohio, presiding. 4:30 to 6 p. m., N. O. P. H. N. Venereal Disease Section, Anne Doyle, United States Public Health Service, presiding. 8 p. m., Reception at Sunset Club, Ladies' Board of Children's Orthopedic Hospital.

Wednesday, June 28.—8-9 a. m., A. N. A. round table, Reorganization, Sarah E. Sly presiding. 8-9 a. m., Round table, Private Duty, Frances M. Ott presiding. 8-9 a. m., Round table, N. O. P. H. N. 8-9 a. m., League round table, Importance of Psychiatric Nursing in the Curriculum of Schools of Nursing, Mae Kennedy, Illinois. 9-11, Session of A. N. A., Importance of Faculty Conferences in All Kinds of Organizations, Margaret Dunlop presiding. 9-11 a. m., Sessions of League. 9 to 1, N. O. P. H. N., Workers in the Field of Public Health and Their Relation to Each Other, Annie W. Goodrich presiding.

2 to 4 p. m., Joint meeting of the three national organizations, under auspices of N. O. P. H. N., Elizabeth G. Fox presiding. Normal Development of the Child. 4:30 to 6 p. m., A. N. A. round table on Tuberculosis, Mary A. Meyers, Indiana, presiding. 4:30-6, League round table, The Present Status of the Work for Venereal Disease Control, Ann Doyle presiding.

8 p. m., Joint session of three organizations, under the auspices of the League. Recent Study of the Education of the Nurse. Presentation of the Report of the Rockefeller Foundation by Josephine Goldmark, presented by Annie W. Goodrich.

Thursday, June 29.—8-9 a. m., Round table of A. N. A., Legislation, Roberta M. West presiding. 8-9 a. m., Round table of League. Student Activities; Student Government, Mary A. Deaver, Cincinnati, presiding. 8-9, N. O. P. H. N. round table. 9-1, Mental Hygiene Section, A. N. A., Elnora Thompson, chairman, presiding. 9-10, Business. 10-11, Open meeting. The Function of the Public Health Nurse in the Mental Hygiene Movement, Alma C. Haupt, Minneapolis. An Approach to Mental Hygiene through Elementary and Secondary Education, Henry S. Grant, B. A., Executive Secretary, Oregon Social Hygiene Society. 9-1, League Instructors' Section, Miss Brown presiding. 9-1, N. O. P. H. N., Municipal Nursing, Anna Drake, Iowa, presiding. 2-4 p. m., Joint session of three organizations under the auspices of the League. Basis of Professional Ethics, Doctor Suzzallo, President Washington University. 4:30 to 6 p. m., Round table of A. N. A., Nurses' Relief Fund, Elizabeth E. Golding presiding.

4:30 to 6 p. m., Round table of League. Intelligence Examination of Students Entering Schools of Nursing, Alice Lake presiding. N. O. P. H. N. round table, State Public Health Nursing Division Superintendents. Superintendents of Visiting Nurse Associations. Public Health Nursing Course Directors, Elnora E. Thomson, Oregon, presiding. 5-6 p. m., Isabel Hampton Robb Memorial Fund Committee.

Friday, June 30.—8-9 a. m., Round table on Reorganization, Sarah E. Sly presiding. 8-9 a. m., Round table, A. N. A., How to Interest Younger Nurses in District, State and National Associations, Jane Doyle, Oregon, presiding. 8-9, League round table, How Can Postgraduate Courses Be Made of More Value? Carrie M. Hall, Massachusetts, presiding. 8-9, N. O. P. H. N. round table, Venereal Disease Nursing, Ann Doyle presiding. 9-11:30, A. N. A. Legislative Section, Roberta M. West, chairman, presiding. Reports on Recent Legislation in States: New York, Elizabeth Burgess; Missouri, Anna Gillis; Colorado; Michigan; Wisconsin, Adda Eldredge; Kansas, Sister Mary Helena. Debatable points in recent acts: Restricted service of members; retention of fees when registration is refused; simultaneous change of board members; granting of temporary licenses; provisions for executing laws. How may reciprocity be interpreted? Is a Minimum Law practicable as a standard for all states? When amending an act to secure compulsory registration, must a period of waiver be appended? Methods of compiling registration laws. Formal contracts for reciprocity between states. 11:30 to 1, A. N. A. Business session. 9-1, League session, Administration of Schools of Nursing, Ethel Johns. 9-1, N. O. P. H. N. session, Visiting Nursing, Glory Ragland presiding. 2-4, A. N. A. session. 2-4, N. O. P. H. N., Rural Nursing, Melinda Havey presiding. 4:30-6, A. N. A. round table, Mental Hygiene, Elnora Thomson presiding. 4-6, N. O. P. H. N. round table, School Nursing Demonstration. 8 p. m., Red Cross meeting, Clara D. Noyes presiding. Address, Miss Noyes, The Nursing Service of the Army, Major Julia C. Stimson, Superintendent. The Nursing Service of the Navy, Mrs. Lenah H. Higbee. United States Public Health Nursing Service, Lucy Minnigerode. The Nursing Service of the Federal Board of Vocational Education, United States Veterans' Bureau, Mrs. Kate C. Hough. Report on Home Hygiene and Care of the Sick of the American Red Cross, Grace Harrington.

Saturday, July 1.—8-9 a. m., Advisory Council, A. N. A. 9-11 a. m., Board of Directors, A. N. A., of League, and of N. O. P. H. N. 11 a. m.-1 p. m., Closing Session, N. O. P. H. N. 11-1, League Closing Session. 2-4, A. N. A. Closing Session. 4-6, Meetings of new boards of directors. 6, Meeting of National Committee on Red Cross Nursing Service.

SCHOLARSHIP AWARD

The Isabel Hampton Robb Memorial Fund Committee announces that the following successful applicants have been awarded scholarships for study at Teachers College, 1922-3: Alma M. Axelson, Moline, Ill.; Helen M. Stelling, Baltimore, Md.; Maud B. Muse, New York City; Helen A. Sparks, Chicago; Alice P. Maull, St. Louis; Phoebe M. Kandel, Cincinnati. There were thirty applicants.

NURSES' RELIEF FUND, REPORT FOR APRIL, 1922

Receipts

Previously acknowledged	$11,141.42
Interest on bonds	20.00
Interest on Liberty bonds	21.25

Alabama: Graduate Nurses' Association of Montgomery	7.00
Arkansas: One individual, Little Rock	1.00
California: Children's Hospital Alum. Assn., San Francisco, $10; Dist. No. 1, Alameda Co., $82; Dist. No. 3, Humboldt, $12; Dist. No. 5, Los Angeles, $80.50; Dist. No. 9, San Francisco, $15; Dist. No. 12, Santa Clara, $11	160.50
Colorado: Larimer County Nurses' Assn. of Fort Collins and Loveland	10.00
Connecticut: Hartford Hospital, graduates, $168.07; students of Hartford Hospital Training School, $22.55; two Middlesex Hospital graduates, $7	197.62
Illinois: Thirteenth District, $9; one individual, Chicago, $1	10.00
Iowa: One individual, Stuart	1.00
Kansas: One individual	4.00
Kentucky: One individual, $5; 20 individuals, $20	25.00
Minnesota: First District, $1; Second Dist., $21; Third Dist., $3; Fourth Dist., $49	73.00
Missouri: St. Mary's Hospital Alumnae, Kansas City, $25; seven individuals, Kansas City, $7; one individual, St. Louis, $1	33.00
Montana: Dist. No. 5, $53.10; Dist. No. 1, $25	78.10
New Jersey: Dist. No. 1, $10; Dist. No. 2, $59	69.00
New York: Auburn City Hospital Alum. Assn., Dist. No. 4, $9; Italian Hospital Alum. Assn., N. Y. City, $6; French Hospital Alum. Assn., $25	40.00
Oregon: Marion County Nurses' Assn., Dist. No. 3	15.25
Oklahoma: State Association	25.00
Pennsylvania: Western Pennsylvania Hospital Alum. Assn., Pittsburgh	100.00
South Dakota: New Madison Hospital Alum. Assn., Madison	7.00
Virginia: Association of Registered Nurses of Norfolk	25.00
Washington: Seattle Committee	39.50
Wisconsin: Tenth Dist., $12; one individual, $5; one individual, $2; three individuals, $3; La Crosse Hospital Alumnae Assn., $10	32.00
	$12,164.64

Disbursements

Paid to 32 applicants	$490.00	
Exchange on checks	1.00	
Postage, treasurer	10.00	
5,000 Folders	15.00	516.00
		$11,648.64
Invested funds		49,150.00
Total, May 1, 1922		$60,798.64

Contributions for the Relief Fund should be sent to Mrs. C. V. Twiss, Treasurer, 14 East 50th Street, New York City, and the checks made payable to the Farmers' Loan and Trust Company. For information, address E. E. Golding, Chairman, 317 West 45th Street, New York City.

M. Louise Twiss, *Treasurer.*

THE JANE A. DELANO MEMORIAL FUND

Mr. Gibson, treasurer of the fund, reported on May 1st, an increase during April of nearly three thousand dollars, making the total $11,968.64. This includes the contributions collected by Miss Hay from nurses in Europe.

ARMY NURSE CORPS

During April, 1922, the following named members of the Army Nurse Corps were ordered transferred to the stations indicated: To Station Hospital, Fort Benning, Ga., 2d Lieut. Blanche Kingsley; to Station Hospital, Camp Bragg, N. C., 2d Lieut. Ruth McCreary; to Letterman Hospital, San Francisco, Cal., 2d Lieutenants Bertha Appleman, Gradie Baggarly, Zita Farrell, Amanda Faunce, Lucy Rawson, Catherine Reilly, Sara G. Roberts, Jennie A. Smith and Sarah M. Tilton; to the Hawaiian Dept., 2d Lieut. Alma H. Bretz; to the Philippine Dept., 1st Lieutenants Florence A. Blanchfield, Ida E. German and Frances M. Steele, 2d Lieutenants Anna Claypoole, Sarah E. Holden, Florence I. Lee, Kathryn M. Morgan and Agnes A. Rosch.

Orders have been issued for the separation from the service of the following named members of the Corps: 2d Lieutenants Lenora E. Achatz, Ruth M. Bradish, Edith R. Brown, Emma E. Burton, Martha E. Calder, Ella M. Clatterbuck, Edna L. Cunningham, Anna C. Davis, Pearl E. Filley, Cecelia A. Finnerty, Emma Gilliams, Clementine Holcomb, Wilhelmina S. Kline, Alice Kluto, Irene V. Landers, Clara Lawson, Freda G. Lund, Ruth H. McAfee, Victoria C. Mateszewski, Marie Machaley, Gertrude E. Murphy, Grace G. Murphy, Constance Padden, Mary K. Sinner.

The following named 2nd Lieutenants, Army Nurse Corps, have been admitted to the Corps and assigned to duty as follows: To Fitzsimons General Hospital, Denver, Colo., 2d Lieutenants Hannah O. Beatty, Virginia Kilroy, Edwina M. Shelton, Frances Sternberg and Esther Van Scoyk; to Letterman General Hospital, San Francisco, Calif., 2d Lieut. Sophie Leandovski; to Station Hospital, Fort Sam Houston, Tex., 2d Lieut. Emily D. Smith; to Walter Reed General Hospital, Takoma Park, D. C., 2d Lieutenants Ruby L. Conner, Ethel M. Good, Eleanor B. Martin and E. Lorraine Setzler.

JULIA C. STIMSON,
Major, Superintendent, Army Nurse Corps, and Dean, Army School of Nursing.

U. S. PUBLIC HEALTH SERVICE

Assignment and Transfer of Chief Nurses and Assistant Chief Nurses for the month ending April 30, 1922: Susie Geer, Chief Nurse, Palo Alto, No. 24, Calif., to Fort Bayard, No. 55, N. M.; Mrs. Clara Schmidt, Chief Nurse, Fox Hills, No. 61, N. Y., to No. 14, New Orleans, La.; Meta C. Brooks, Chief Nurse, No. 69, N. C., to Chicago, No. 5, Ill.; Barbara Hunter, Chief Nurse, Otsego, No. 60, N. C., to Dawson Springs, Ky.; Minnie Goodwin, Chief Nurse, St. Louis, No. 35, Mo., to Fort Stanton, N. M.; Helen Smith, Chief Nurse, San Francisco, No. 19, Calif., to Palo Alto, Calif.; Mabel Alexander, Chief Nurse, St. Louis, No. 35, Mo.; Kathleen Dorsey, Chief Nurse, Norfolk, No. 29, Va., to Washington, No. 32, D. C.; Mary R. Swann, Chief Nurse, Bronx, N. Y., to San Francisco, Calif.; Charlotte McAlister, Asst. Chief Nurse, Dwight, No. 53, Ill., to Chicago, No. 36, Ill.; Catherine Winters, Acting Chief Nurse, Algiers, to Savannah, Ga.; Josephine Gaffney, Acting Chief Nurse, Fort Townsend, Washington, transferred as Assistant Chief Nurse, to San Francisco, Calif.; Isabel Shannon, Acting Chief Nurse,

Chicago, No. 5, Ill., as Assistant Chief Nurse, to Bronx, N. Y.; Nellie Bauldry, Acting Chief Nurse, Knoxville, No. 57, Iowa, to Helena, No. 72, Montana; Alpha Hoover, Assistant Chief Nurse, Chicago, No. 30, Ill., to Kansas City, as Acting Chief Nurse; Margaret Ramey, Assistant Chief Nurse, Kansas City, transferred as Chief Nurse, to St. Paul, Minn.; Lula Greene, Assistant Chief Nurse, Fox Hills, N. Y., as Acting Chief Nurse to Algiers, La.; Ethel Houston, Assistant Chief Nurse, Fox Hills, No. 61, N. Y., to Lake City, Florida; Grace Dowling, Assistant Chief Nurse, New York, No. 38, N. Y., to Bronx, N. Y.; Grace Engleman, Assistant Chief Nurse, Boise, No. 52, Idaho, as Acting Chief Nurse, to Walla Walla, Wash.; Eunice Worrell, Assistant Chief Nurse, Baltimore, No. 56, Md., as Acting Chief Nurse, to Norfolk, Va.; Virginia Oakley, Promoted from Head to Assistant Chief Nurse, Washington, No. 32, D. C.; Mary Tobin, Promoted from Head to Assistant Chief Nurse, Baltimore, as Instructor in Training School.

LUCY MINNIGERODE,
Superintendent of Nurses, U. S. P. H. S.

NAVY NURSE CORPS

The following nurses have been appointed and assigned at the Naval Hospital at the Station indicated: To Annapolis, Md., Daisy Slater (reappointment); to Chelsea, Mass., Ella P. Putnam; to Great Lakes, Ill., Esther M. Stolt; to Mare Island, Calif., Gladys M. Jackson, Nellie M. Skinner; to New York, N. Y., Catherine H. Snyder.

The following nurses have been *transferred:* To Canacao, P. I., Helen L. McKenzie, from Guam; to Chelsea, Mass., Lena A. Richardson, from Pensacola, Fla.; to Great Lakes, Ill., Janie Bennett, from Mare Island, Calif.; to Guam, Lillian M. Adams, from Mare Island, Calif.; Erna Dieselkamp, to Pearl Harbor; Beatrice A. Fahy, Dessa B. Kissel, Edith M. Lindquist and Lillian L. Reilly, from Mare Island, Calif.; to League Island, Pa., Mary L. Kelley, from Chelsea, Mass.; Zilla Sprunger, from Great Lakes, Ill.; to Mare Island, Calif., Mary Tormey, from Guam; Elizabeth A. Westmacott (Chief Nurse), from Tutuila, Samoa; to Pearl Harbor, T. H., Lela B. Coleman and Josephine Rugg, from Mare Island, Calif.; to Pensacola, Fla., Jessie M. Schraffenberger, from Great Lakes, Ill.; to Portsmouth, Va., Rose M. Culbertson, from Charleston, S. C.; Mary H. King (via *U. S. S. Henderson*), from St. Thomas, V. I.; to Quantico, Va., Rose K. Conley, from Chelsea, Mass.; Mollie Detweiler (Chief Nurse), (temporary duty), from Portsmouth, Va.; to San Diego, Calif., Elizabeth H. Beall, from *U. S. S. Mercy;* Rose M. Culbertson and Emma L. Spatcher (via *U. S. S. Chaumont*), from Portsmouth, N. H.; to Tutuila, Samoa, Mabelle S. Torgeson, from Mare Island, Calif.; to Washington, D. C., Margaret M. Aughivan, from Portsmouth, Va.; Ethel E. Briggs and Harriet A. Chinn (via *U. S. S. Henderson*), from St. Thomas, V. I.; Ella V. Parrott, from Chelsea, Mass.; Minnie D. Stith, from *U. S. S. Relief;* to Washington, D. C. (Bureau Medicine and Surgery), J. Beatrice Bowman (Chief Nurse), (temporary duty), from *U. S. S. Relief;* to Yokohama, Japan, Louise Cooke and Mina A. King (Chief Nurse), from Guam; to *U. S. S. Chaumont,* Katrina E. Hertner (Chief Nurse), (temporary duty), from Bureau of Medicine and Surgery, Washington, D. C.; to *U. S. S. Henderson,* Miriam F. Ballard (temporary duty), from Washington, D. C.; Gertrude Campbell (temporary duty), from Portsmouth, Va.; Katherine M. Gallagher (temporary duty), from Annapolis, Md.; to *U. S. S. Mercy,* Ruth E. Dawson, from San Diego, Calif.

Honorable Discharges: Inez L. Donaldson (Chief Nurse); Emma J. Folmsbee, Mary G. Johnson.

Resignations: Bertha C. Henrich, Laura L. Holmes, Louise E. Koenig, Grace E. MacMillan, Eleanor B. Martin, Lillie M. Truitt.

Discharged from Inactive Status: Emma L. Colebourn.

LENAH S. HIGBEE,
Superintendent, Navy Nurse Corps.

THE ARMY SCHOOL OF NURSING

The first annual reunion of the Army School of Nursing Alumnae Association will be held in Washington, D. C., June 8-10.

TRANSFER OF HOSPITALS

A transfer has recently been made of forty-seven hospitals from the U. S. Public Health Service to the Veterans' Bureau. This transfer affects 80 per cent of the nurses formerly on duty in the hospital division of the Public Health Service, numbering about 1,500. It is too soon to tell how conditions will differ, if at all, by the change in management, but it is expected that a definite report can be given by the time of the Seattle convention.

NURSES AS TECHNICIANS

The Radiological Society of North America is considering the qualifications necessary for technicians, their examination, control, and training. For many reasons, this society favors the employment of nurses and it may establish special courses for preparing them for such work. It is probable that only registered nurses who have a sound professional training as a basis for such special courses, will be accepted as applicants.

UNITED STATES CIVIL SERVICE COMMISSION

The United States Civil Service Commission states that there is a need for nurses in the hospitals of the United States Veterans' Bureau and the Public Health Service and at Indian schools and agencies. Applications will be received for these positions until further notice.

Applicants are not given a written examination, but are rated upon the subjects of physical ability, training, and experience. Dietitians are also needed. Full information concerning entrance requirements, salaries, etc., and application blanks, may be obtained by communicating with the United States Civil Service Commission, Washington, D. C., or the secretary of the Civil Service Board at the post office or customhouse in any city.

THE NATIONAL TUBERCULOSIS ASSOCIATION held its Eighteenth Annual Meeting in Washington, May 4, 5 and 6. Approximately 800 delegates attended the meeting.

Significant statements were those made by Dr. Victor C. Vaughan, Chairman of the National Research Council, and Dr. Livingston Farrand, President of Cornell University and President of the National Health Council. Dr. Vaughan stated that the death rate from tuberculosis has declined in the United States during the past thirty years from about twenty per thousand to thirteen, indicating a saving of approximately 700,000 lives per year at the present time. While it is impossible to say to what extent the death rate may be reduced, Dr. Vaughan believed that it should be possible to minimize it to seven. Dr. Farrand considered this figure to be a conservative one. Both Dr. Vaughan and Dr. Farrand believed that the greatest danger to the United States in the European situation today does not arise from the possibility of transmitting

plagues and epidemics, though it has been estimated that there are about twenty million typhus cases in Russia at the present time. The real danger lies in the fact that the present generation of Europeans—Austrians, Germans, Russians, Hungarians, etc.—is an under-fed and under-developed generation, and unless the world is interested in bringing these people up to normal standards mentally and physically, the next generation will be unfit to carry on the civilization of Europe.

One of the most interesting features of the meeting was the Modern Health Crusade luncheon which was held at the City Club on May 4, at which Ambassador J. J. Jusserand of France, Dr. Sao-Ke Alfred Sze, Chinese Minister to the United States and Dr. Bedrich Stepanek, Czecho-Slovakian envoy, spoke of the Modern Health Crusade and public health work which is being conducted in their respective countries.

An announcement was made at the meeting that a substantial part of the income from $10,000,000 for the next few years has been set aside by the Milbank Fund to demonstrate in several New York State districts how tuberculosis can be controlled in American communities. The announcement was made by John A. Kingsbury, Secretary of the Fund established by Mrs. Elizabeth Milbank Anderson of New York City. The demonstrations are to be in the nature of a memorial to Mrs. Anderson and are to be based upon the successful experience of the Framingham Health and Tuberculosis Demonstration.

California: The California State Nurses' Association will hold its annual meeting in San Jose, June 19-21. Delegates passing through California en route to Seattle are invited to attend these meetings. San Francisco.—Stanford University Medical School held graduating exercises for a class of 32 from the Stanford School of Nursing in the Auditorium, on the evening of May 12. Dancing followed the exercises.

Colorado: The President of the Colorado State Nurses' Association, Mrs. Pine, asks all nurses who are planning to go to Seattle, and who would be interester in forming a Colorado Party, that they may have their own Pullman, etc., to write Harriott Hart, 963 Corona Street, Denver, Chairman Transportation Committee for Colorado. They should signify whether they would like the side trip to Glacier National Park. Nurses from Nebraska might join the party at Alliance, Neb. Denver.—Community graduation exercises were held on the evening of May 12, at Mercy Junior High School for the graduating classes of the training schools of City and County Hospital, Children's Hospital, Park Avenue Hospital, and St. Luke's Hospital.

Connecticut: New Haven.—The Connecticut Training School Alumnae Association has held well attended meetings with a speaker and a social hour following each one. Because of important health meetings in Hartford, the May meeting was held on the second Thursday with a speaker from the Chamber of Commerce on Local Health Measures. An appeal for the Relief Fund will be made in the near future. On April 29th, a food sale was held, the proceeds of which will be used to aid the central registry. The last meeting until fall will be a picnic at the shore in June.

District of Columbia: The Graduate Nurses' Association of the District of Columbia held its annual meeting on May 1, when the following officers were elected: President, Ida F. Butler; vice-president, Evelyn Hawkins; secretary, Katherine Holmes, American Red Cross; treasurer, Jean Coons; directors, Bessie Calvert, Cora Kibler, Eleanor Maynard, Mattie Gibson, Mrs. Frances Elsey.

Florida: Orlando.—The Central Florida Registered Nurses' Club met

on March 28 at Jefferson Court. Dr. Osincup of Washington spoke on Public Health Work in the schools of Orange County. A reception was given to the graduate nurses of the city. The Club met on April 25 at the Orange General Hospital, when several subjects of interest were discussed and a paper on Psychiatry, written by Dr. Spiers, was read.

Georgia: Atlanta.—THE FIRST DISTRICT ASSOCIATION, at its April meeting, adopted the following resolutions: That this Association favors the diverting of the $2,000 raised for the Interstate Secretary fund toward a Speaker's fund; that this Association go on record as approving the increase of dues from the State to the National Association.

Illinois: Chicago.—THE PRESBYTERIAN HOSPITAL held graduating exercises at the Sprague Home, on May 18, for a class of fifty-one. The address was given by Carol L. Martin. ST. LUKE'S ALUMNAE ASSOCIATION has decided to send $100 a year, for ten years, to the Nurses' Relief Fund, in memory of Margaret E. Johnstone. Gladys Lecklitner and Jeanne Gallien, class of 1920, Illinois Training School, have accepted positions at the County Hospital, Twin Falls, Idaho.

Indiana: Fort Wayne.—THE LUTHERAN HOSPITAL SCHOOL FOR NURSES held commencement exercises on the evening of May 3. Rev. Louis Kirst of Beaver Dam, Wis., and Dr. H. A. Duemling were the principal speakers. The diplomas were presented by Rev. August Lange; the hospital badges, and the gifts of Hospital Aid Society,—a set of instruments for each graduate, were presented by the superintendent of nurses, Anna Holtman. A reception followed the exercises. Richmond.—THE REID MEMORIAL HOSPITAL ALUMNAE ASSOCIATION met at the Nurses' Home, April 26. The new officers were in charge: President, Mrs. Carl Kaufman; vice-president, Virginia Jones; secretary, Rhea Ackerman; treasurer, Catherine Daub. It was decided after participating in the activities for National Hospital Day, May 12, that the Alumnae entertain the faculty and student nurses at a picnic supper in the hospital woods. Indianapolis.—NATIONAL HOSPITAL DAY was celebrated by all the Indianapolis hospitals with public receptions, demonstrations of modern nursing, musical and speaking programmes. As the day marked the twenty-fifth anniversary of the St. Vincent's Nurses Training School, the hospital held an all day programme, the nurses presented a purse to Mary Gladwin, Indiana Educational Director, for the memorial to Jane A. Delano; following the presentation Miss Gladwin addressed the nurses. In the evening a reunion of all the nurses and interns graduated from the school was held. Among the speakers for the evening were Monsignor Francis H. Gavisk, of the Indianapolis Diocese; Mrs. J. Herrman, the first nurse to graduate from the school, and Dr. J. H. Oliver, Dr. Frank Morrison, Dr. O. G. Pfaff, former interns. Student nurses gave a playlet entitled Six Cups of Chocolate. THE INDIANA STATE LEAGUE and the INDIANA HOSPITAL ASSOCIATION met at the Robert W. Long Hospital, April 20. Mary C. Wheeler of Chicago addressed the League on Affiliation. Annabelle Peterson, Assistant Director of Public Health Nursing for Indiana, reports the following appointments: Dorothy Dean Hammer, Spencer, Owen County; Lilah Curry, Hartford City, Blackford County; Helen Boyer, Rensselaer, Jasper County; Ruth Bwinell, second nurse, Auburn, DeKalb County. A Public Health Programme will be held at each District meeting in May these programmes will take the place of the yearly Public Health Conference. On May 19-27, a Health Exposition was held in Indianapolis, in which many nurses took part. A statue of Hygeia, Goddess of Health, was unveiled on the opening day, fifty nurses in various uniforms taking

part in this ceremony. This is the third such exposition held in this country. Mary L. Wiley is doing general duty in the Decatur County Hospital, Greensburg. At the annual meeting of the INDIANAPOLIS CITY HOSPITAL NURSES' ALUMNAE ASSOCIATION the following officers were elected: President, Belle Emden; vice-presidents, Mary Mullen and Eva Herreld; secretary, Diana Hessey; treasurer, Mary Lybrook; directors, Nellie Davis, Mable Scott Huggins, Mary Wright, Ilia Anderson.

Iowa: HARRIET LEITH, National Child Welfare Organization, addressed the Des Moines nurses on May 16. A NURSES' RELIEF FUND BENEFIT was given at the Methodist Nurses' Home, resulting in $18.25 for the Fund. Cleo Cavenaugh, former superintendent of Mercy Hospital, has returned to Bellevue. Council Bluffs.—Both MERCY HOSPITAL AND THE JENNIE EDMUNDSON MEMORIAL HOSPITAL of Council Bluffs observed Hospital Week. The Edmundson Hospital held open house May 12. The girls of the high schools came and were addressed by the supervisors of the Training School. Demonstrations in bed-side care of the patient and laboratory work were also given. They were taken through the new wing of the hospital, the laundry, engine room, nurses' dining room, diet kitchens and nurses' home. They were greatly interested and some expressed a desire to join the September class. THE JENNIE EDMUNDSON HOSPITAL ALUMNAE voted $250 to furnish one of the new rooms at their last regular meeting. They enjoyed an extremely interesting address on Fetal and Infant Nutrition by Dr. Mary L. Tinley, one of the Hospital Staff members. Iowa City.—Ellen Dawson has been appointed supervisor of the Children's Hospital. SHIRLEY WHITE has been appointed first assistant to the superintendent of nurses, University Hospital. Una Merryfield, Presbyterian Hospital, Chicago, has taken the position of night supervisor at University Hospital. Stella Vernard and Lillian Anderson, both University Hospital graduates, are making a tour of the State of Iowa, recruiting student nurses. They are talking to groups of college and high school girls on the advantages of nursing as a profession. Cedar Rapids.—The May meeting of ST. LUKE'S ALUMNAE was held at the home of Helen Dunlop, as a farewell courtesy to the president, Anna C. Goodale, who has resigned her position as superintendent of the hospital and leaves soon for a much needed rest. A short business session was held and the remainder of the afternoon given over to cards. A kodak was presented Miss Goodale as a parting gift from the alumnae. She will be succeeded by Svea Landh, a graduate of Christ's Hospital, Cincinnati.

Kansas: THE KANSAS STATE NURSES' ASSOCIATION held its eleventh annual meeting in the Chamber of Commerce, Kansas City, May 12 and 13. The Convention opened with Invocation and prayer by Reverend Carl Nau of St. Paul's Church. Mayor Burton in his address of welcome presented the responsibilities of the city administrators in a most conscientious light. Mrs. Alma O'Keefe, president of the Association, responded in the name of the Kansas nurses. The President then introduced Bena M. Henderson of Chicago, who had come to be with them at the Convention and whose presence was greatly appreciated. Reports were given from the Secretary, Treasurer, Nurses' Examining Board and various committees. At the afternoon session, papers were given by Miss Henderson, Dr. Foust, Phyllis Dacy and a number of unusually interesting papers from the Private Duty Section. In the evening an elaborate banquet was given by the Kansas City nurses at the Grand Hotel. Several distinguished visitors were present from the medical profession and citizens. After-dinner speeches were made by Miss Henderson, Dr. Francisco and

Reverend Carl Nau. Mrs. O'Keefe made a short talk at the beginning and Ada Lindquist acted as toastmistress. Saturday morning, round tables were held by the Private Duty and Public Health Sections and a Round Table for institutional nurses was presided over by Miss Henderson. The general session opened at ten o'clock, Mrs. O'Keefe presiding. Several interesting papers were given, especially Lena Willey's paper on Vitamines. Dr. Kenney, head of the State Institution for Tuberculosis at Norton, gave a most interesting and instructive address on Public Health. At the afternoon session, the two papers, one by Helen Farnsworth on Schools of Nursing and the other by Mrs. George Miller on Childhood Commercialism, gave much food for thought. The election of officers then took place with the following results: President, Ethel Hastings; vice-presidents, Mrs. Bailey and Bertha Pace; secretary, Carolyn Barkemeyer; treasurer, Ottilie Fox. These officers with the following constitute the Board of Directors: W. Pearl Martin, Sister Catherine Voth, Bertha Westrom, Elizabeth Condell, Sister Frances de Sales, and Mrs. Fain. The meeting then adjourned that the members might have the pleasure of taking an automobile ride provided by the Kansas City nurses. As the time of meeting for the Association was changed from the spring to the fall, the Kansas nurses will not come together in annual convention until October, 1923, when they meet in Hutchinson. District No. 3 met in Coffeyville, April 22, with 25 present. This district has met regularly twice a year since organizing, always in different cities, to give the members a chance to get acquainted. The April meeting was held in the Red Cross rooms. After a talk by each member on her special work, there was an auto ride about the city and dinner at the Mecca Hotel. The public health nurses and executive secretaries of Coffeyville, Cherryvale, Neodesha and Independence have a little club which meets once a month at which problems are discussed.

Kentucky: The Kentucky State Association of Registered Nurses will hold its 16th annual convention at the LaFayette Hotel, Lexington, June 1, 2, and 3.

Maryland: New legislation has been enacted in the state as follows:

An Act to add seven new sections to Article 43 of Bagby's Annotated Code of 1911, to follow immediately after Section 208, of said Article, and to be designated as Sections 208A, 208B, 208C, 208D, 208E, 208F, and 208G, sub title "Licensed Practical Nurses," to provide for State registration of licensed practical nurses for the sick.

Section 208A. Be it enacted by the General Assembly of Maryland, That it shall be the duty of said Board of Examiners of Nurses at its meetings, as provided for in Section 208 of this Article, to examine all applicants for registration as licensed practical nurses under this sub title, and to determine their fitness and ability to give efficient care to the sick as such licensed practical nurses. Upon filing application for examination and registration as a licensed practical nurse each applicant shall pay a fee of Five Dollars ($5.00).

Section 208B. And be it further enacted, That it shall be the duty of said Board of Examiners to determine, and said Board is hereby empowered in its sound discretion to determine, the qualifications of all applicants for registration as licensed practical nurses; and each applicant shall furnish evidence satisfactory to said Board of Examiners that he or she is eighteen (18) years of age, is of good moral character, can read and write the English language and has received a certificate from an institution in which not less than a nine months'

course of training with a systematic course of instruction is given to the satisfaction of said Board of Examiners.

Section 208C. And be it further enacted, That the said Board of Examiners is hereby empowered and authorized in its sound discretion to register as a licensed practical nurse without examination any person who have had at least two (2) years' experience in caring for the sick prior to the first day of February, 1922; provided such person shall furnish evidence satisfactory to said Board of Examiners that he or she is eighteen (18) years of age, is of good moral character and can read and write the English language; and further provided such persons apply in writing to the said Board on or before the thirty-first day of December, 1922, upon payment of the registration fee.

And it shall be unlawful after January 1st, 1923, for any person to practice nursing as a licensed practical nurse without a certificate from said State Board of Examiners. A person who has received his or her certificate according to the provisions of this sub-title shall be styled and known as a "Licensed Practical Nurse." No other person shall assume such title, or assume the abbreviation of "L. P. N.," or any other letters or figures to indicate that he or she is a licensed practical nurse.

Section 208D. And be it further enacted, That in every year during the month of February, every licensed practical nurse registered under the provisions of this Act shall cause his or her certificate to be recorded in the office of the State Board of Examiners of Nurses, together with an affidavit of his or her identity, as the person to whom the same was issued, and of his or her place of residence at the time of such registration. The registrant shall pay to the said Board of Examiners a fee of fifty cents for each such registration.

Section 208E. And be it further enacted, That this sub-title shall not be construed to affect or apply to the gratuitous nursing of the sick or members of the family, or shall not prohibit any one not a "Licensed Practical Nurse" from nursing for hire, provided such person shall not hold his or herself out as a "Licensed Practical Nurse."

Section 208F. And be it further enacted, That any person violating any of the provisions of this sub-title, or who shall wilfully make any false representations to the Board of Examiners of Nurses in applying for a certificate shall be guilty of a misdemeanor and upon conviction shall be punished by a fine of not more than Two Hundred Dollars ($200.00).

Section 208G. And be it further enacted, That said Board of Examiners may revoke any certificate for sufficient cause, but before this is done the holder of said certificate shall have thirty (30) days' notice, and after a full and fair hearing of the charges made, by a majority vote of the Board, the certificate may be revoked.

Section 208H. And be it further enacted, That this Act shall take effect from the first day of June, 1922.

An Act to repeal and re-enact with amendments Sections 201 and 204 of Article 43 of Bagby's Annotated Code of 1918 entitled "Registration of Nurses," as enacted by Chapter 537 of the Acts of the General Assembly of Maryland passed at the Session of 1916, to provide for State Registration of Nurses.

201. Be it enacted by the General Assembly of Maryland, That from time to time upon the occurring of vacancies upon the existing State Board of Examiners of Nurses, whether such vacancies shall happen by reason of the expiration of the terms for which the members of said Board were appointed, respectively, or by reason of any other cause, the Maryland State Nurses' Association

shall submit to the Governor of the State the names of five of its members who have not had less than five years' experience in their profession; and from said list of nominations so furnished him, or from a further list of five additional names of such members having the same qualifications, to be furnished to the Governor, by said Association, upon his request for additional names, the Governor shall appoint a member or members of said State Board of Examiners of Nurses, as vacancies upon said Board shall occur, so that said Board shall consist of five persons, each of whom shall be appointed for a term of three years, or in case of a vacancy occurring during the term for which any member of said Board may have been appointed, then for the unexpired portion of said term.

204. And be it further enacted, That it shall be the duty of the said Board of Examiners to determine, and said Board is hereby empowered in its sound discretion to determine, the qualifications of all applicants for registration; and each applicant shall furnish evidence satisfactory to said Board of Examiners that he or she is twenty-one (21) years of age, is of good moral character, has received the equivalent of a high school education, and has graduated from a training school connected with a general hospital where three years of training with a systematic course of instruction is given in the hospital, or has graduated from a training school in connection with a hospital of good standing supplying a systematic three years' training corresponding to the above standards, which training may be obtained in two or more hospitals; provided, however, that credit may be given by the said State Board of Examiners for not more than eight months of said above mentioned three years hospital training upon an applicant furnishing evidence to said Board of Examiners that he or she has received a scientific or practical education or training in some school, college, public health or similar organization, which course is approved by said State Board of Examiners.

Massachusetts: The Massachusetts State Nurses' Association will hold its annual meeting in Boston, June 13 and 14. Pittsfield.—Edith M. Safford, who has been Supervising Nurse in the Obstetrical Department of the House of Mercy Hospital for the past eighteen years, became superintendent of the Coolidge Memorial Hospital for the treatment of incipient tuberculosis, May 15. Edith Lacey, a student, Henry W. Bishop, 3rd, Memorial Training School for Nurses, was awarded the Jones-Bagg Scholarship providing a four months' Public Health course at Columbia and Henry Street and began her course June 1. Boston.—The Alumnae Association of the Massachusetts State Infirmary of Tewksbury held its May meeting at the Boston Nurses' Club, May 4. Carrie M. Hall, president of the State Nurses' Association, spoke on Legislation and Organization. The Association held its annual whist and dancing party at the Town Hall, Tewksbury Centre, May 9.

Michigan: Detroit.—The Fifth Annual Community Commencement of Detroit Training Schools for Nurses was held on the evening of May 9 in Arcadia Auditorium. Mayor Couzens presided. Carolyn E. Gray, professor of Nursing, Western Reserve University, Cleveland, gave the address. The participating schools graduated students as follows: Grace Hospital, 32; Providence, 15; Woman's, 8; Samaritan, 1; St. Mary's, 13; Children's, 9; Harper, 40. Couzens Hall, the beautiful new home for student nurses of Harper Hospital was formally opened on May 10, when a reception was given to the graduating class. The student nurses of Grace Hospital are enjoying the use of a beautiful summer home on the Detroit River. The donor is Mrs. Helen N. Joy. The house will accommodate about fifty, and is open for the use of pupil

nurses in the training school from May 1st to October. Agnes Gordon, for a short time superintendent of nurses at the Highland Hospital, Rochester, N. Y., has accepted the position as superintendent at the Receiving Hospital in Detroit. Miss Gordon is a graduate of Grace Hospital, class of 1904. Grace Hospital graduates gave a ball, April 20, at the Hotel Statler for their hospital scholarship fund. They are also raising $2,000 to endow the Williams-Porter Hospitals at Techow, Shantung, China. The income from this fund is to maintain a native nurse in training. The course is four years and is open to men and women students. The graduates are registered nurses in China. Florence Scratch, a 1921 graduate of Grace Hospital, is leaving to engage in missionary work in China. Ann Arbor.—A class of 46 student nurses will graduate at the annual commencement of the University of Michigan, which takes place June 19. This includes three students of the combined five-year course in Letters and Nursing. Seven students who have completed their work in the Literary College, among them two Chinese girls, will enter the Training School for Nurses next September. Marian E. Tucker, Mt. Holyoke, 1919, University of Michigan Training School, 1922, was elected to represent the women students of the Student Volunteers of the United States, at the annual convention of Y. W. C. A. workers at Hot Springs, Arkansas, in April. Augusta Nieuwma, class of 1913, for the past year Assistant Superintendent of Nurses, has resigned her position. Kathryn Sill, class of 1921, has accepted the position of clinic nurse to Dr. Crile at Lakeside Hospital, Cleveland. Mary A. Welsh, for the past three years Superintendent of Nurses at the University Hospital, has resigned, to take effect July 1. Louise Gliem, class of 1922, Columbia, and graduate of Battle Creek Sanitarium, 1917, has accepted a position of Assistant to the Superintendent of Nurses at the University of Michigan Hospital. Marie Wanseck, University of Michigan, 1913, and Johns Hopkins Training School, 1921, has accepted a position of Assistant to the Superintendent of Nurses at the University of Michigan Hospital. Kalamazoo.—Commencement exercises for Bronson Hospital were held May 12. Mrs. Barbara H. Bartlett, Professor of Public Health Nursing, University of Michigan, Ann Arbor, spoke on The Joy in Personal Service. Port Huron.—Port Huron Hospital Training School held Easter memorial services for Jane A. Delano. The Alumnae Association of the school held an open meeting at the parish house of Grace Church on April 18. Harriett Beard, Supervisor of the Department of Safety Education of Detroit Public Schools, spoke on Safety Education, an address which was enjoyed and appreciated. A reception followed.

Minnesota: The Minnesota State Registered Nurses' Association held a unique and enthusiastic spring meeting on April 22 in Curtis Hotel, Minneapolis. Four hundred nurses attended the afternoon session, which was addressed by Helen Hoy Greeley of the New York bar. She spoke quite idealistically of The Future of Nursing Education, anticipating the day when student nurses will all be emancipated from exploitation and when hospital training itself will be limited to a period of laboratory work comparable to the experience of student lawyers in the courts and medical students in the hospitals. Another feature of the meeting was the unexpected honor of having present Minnie Ahrens, who brought a message from the Central Division of the American Red Cross. Good fellowship was the keynote of the banquet of two hundred fifty nurses who remained for the evening programme conducted by the Public Health Section of the State Association. The entertainment was a lively debate on the subject: Resolved, that it is advisable to have separate state organizations for Public

Health Nursing. The affirmative was represented by Ruth King of the Visiting Nurse staff, Minneapolis; Marie MacDonald, of the school nurses, Minneapolis; Dr. Richard Olding Beard of the University of Minnesota; the negative was represented by Anna Westley, Registrar of District 3; Beatrice Bain, night supervisor of the City and County Hospital, St. Paul; and Mrs. A. R. Colvin, St. Paul. After long deliberation of the jury, Mrs. Greeley announced that the affirmative had won by a vote of 3 to 2. The debate stirred up considerable discussion from the floor and many opinions were expressed on both sides. Miss Ahrens showed how a section can function more effectively than a separate organization. The Legislative Committee of the State Association met on April 22 with Helen Hoy Greeley and were entertained at a luncheon for Mrs. Greeley given by the chairman of the committee, Caroline Rankiellour. It is anticipated that one hundred nurses will go from Minnesota to the Convention at Seattle. Among them a Booster Club is being formed to bring the 1924 convention to St. Paul. A lively meeting of the club was held May 2, at the Northern Pacific Hospital in St. Paul. Winona.—The Winona General Hospital held commencement exercises for a class of ten, at the Parish House, on May 12. John Dietze presided. Addresses were made by Rev. George S. Keller and by Caroline Rankiellour, inspector of training schools for Minnesota. The pins were presented by Mr. Dietze. A reception followed the exercises. Minneapolis.—The Third District Nurses' Association held its annual meeting May 11, and elected the following officers: President, Louise Kellogg; second vice-president, Margaret Flahaven; secretary-treasurer, Mrs. R. G. Olson; directors, Louise Lienan, Mrs. Ida Hummel, Mrs. Dorothy Kurtzman. Rochester.—St. Mary's Hospital opened its new surgical pavilion on May 12, under the direction of the Rochester Child Health Association, when five thousand people visited the building. It is considered the most modern surgical hospital in the world. It has a present capacity of 306 and can be expanded to twice that number. There are a clinical amphitheatre seating 250, and ten other operating rooms, a pathological laboratory, a complete X-ray equipment, a main kitchen, and 13 diet kitchens.

Mississippi.—Ernestine Bryson has been chosen as secretary-treasurer of the Board of Examiners of Nurses, succeeding Bessie O. Brougher. The Board will hold an examination the first Monday and Tuesday in July.

Missouri.—All applications for the annual re-registration of nurses in Missouri have been sent out. A number of these applications are being returned on account of wrong address. Any nurse who is registered in Missouri and who has not received an application for re-registration is urged to write the office of the Missouri State Board of Nurse Examiners, 620 Chemical Building, St. Louis, Missouri—Harriet L. P. Friend, Secretary and Educational Director. As soon as certificates of re-registration are issued for the year ending August 31, 1923, a list of all so registered will be mailed to all holding these certificates. St. Louis.—St. John's Hospital held graduating exercises for a class of eleven on May 2. The alumnae banquet was given at Hotel Statler on May 4, followed by dancing.

Montana: The Montana State Association of Graduate Nurses will hold its annual meeting at Great Falls July 12 and 13.

Nebraska: Lincoln.—St. Elizabeth's Hospital Alumnae Association held its annual meeting in the nurses' rest room of the hospital. The following officers were elected: President, Lila M. Keenan; secretary, Frances Putnam; treasurer, Frances L. Neukirch. Besides the recent graduates being admitted

to membership, Sister M. Edwarda, Superintendent of the School of Nursing, was enrolled as an honorary member.

New Jersey: THE NEW JERSEY STATE ORGANIZATION FOR PUBLIC HEALTH NURSING held its annual meeting at the City Hall, Newark, April 8. The morning was occupied by business and reports with an address at 11 by Dr. Karl R. Keppler on Bloodless Surgery. In the afternoon addresses were given as follows: Influence of Disturbance of Vision and Hearing on the Mental Development of the Child, Wells P. Eagleton, M.D.; Mental Conflicts As Causes of Misconduct in Children, Marion Kennedy, M.D. Officers elected are: President, Helen Stephen; vice-president, Harriet Van Der Veer; recording secretary, Frances A. Dennis; corresponding secretary, Helen Wickham; treasurer, Grace Wells; director, Mrs. L. J. Gemmel. Hackensack.—The laying of the corner stone of the Hackensack Hospital took place on May 5. The student nurses gave a play on April 21 for the purpose of furnishing a room in the new building, making $400. The Alumnae Association gave a social and dance on April 29 for the benefit of the endowment fund for the new building, $75 being gained.

New Mexico: THE NEW MEXICO STATE NURSES' ASSOCIATION held its second annual meeting jointly with the New Mexico State Public Health Nurses' Association April 27 and 28 in Albuquerque. The Public Health Association had a most interesting programme, their reports show the wonderful work and progress they have made the last two years. The counties in New Mexico are as large as some of our Eastern states, very isolated and poor roads, so that the public health nurse has many miles of travel and many hardships to endure. K. Louise Wills of Las Vegas read a most interesting paper on how she trained the midwife in her county, making her safe in the community, the paper was most heartily endorsed by the public health physicians. In the evening, Ella Bartlett, superintendent of the Presbyterian Sanatorium, gave a reception for the visiting nurses. The following morning the State Association convened at St. Joseph's Hospital with a large attendance, the invocation was given by Father Doyle, the address of welcome was presented by Bertha C. Rowe, Albuquerque, the response was given by Bertie A. Ross, Tucumcari, following was an address by Dr. L. S. Peters on Tuberculosis and the Nurse. An hour was then given to business, St. Joseph's Alumnae was accepted by the Association. Miss Gavin, St. Joseph's School, gave an interesting paper on the Private Duty Nurse, the meeting then adjourned for a luncheon at the Alvarado Hotel, given by the Albuquerque nurses. At the afternoon meeting, Miss Wills again read her paper on the Training of the Midwife for the benefit of those who did not hear it the previous day. Frances Robertson, Silver City, read a very original paper on The Army School of Nursing. Amanda Metzger then read the proposed bill for the licensed nurse; the bill was thoroughly discussed; amendments and corrections will be made and the bill will be ready for the November meeting. Matilda Harris, the Red Cross Public Health Supervisor for New Mexico and Colorado, gave an interesting talk on the work of the Red Cross. It was decided by the Board of Directors to hold a meeting in November in Albuquerque at the time of the teachers' convention. After the adjournment of the meeting, Sisters of St. Joseph's Hospital gave a very delightful reception. Officers: President, Teresa McMinamen; vice-presidents, Mrs. Blanche A. Montgomery, Catherine Taylor; secretary, Bertha C. Rowe; treasurer, Sister Frances deChantal. THE PUBLIC HEALTH NURSES' ASSOCIATION had the following programme: Morning, joint session with health officers. Afternoon, Round Table. Child Health Conferences of 1921, discussion on Points To Avoid and Ways To Improve. Develop-

ment of Clinics, Corrective, Dental. Health Play. Health Pageant. Business. Round Table on: Monthly Report Forms, Points of Technique, Nurse Recruiting Talks in High Schools. Officers elected are: President, Bertie A. Rees, Tucumcari; vice-president, Catherine Taylor, Roswell; secretary and treasurer, Margaret Tupper, Santa Fe. Albuquerque.—DISTRICT 1 has been organized with the following officers: President, A. Grace Gettman; vice-presidents, Elizabeth Wetherill, Emma S. Maylor; secretary, Frances C. Maron; treasurer, Jennie May Gavin. ST. JOSEPH'S HOSPITAL has organized an alumnae association, meetings to be held quarterly. Officers are: President, Jennie M. Gavin; vice-presidents, John Miller, Lillian F. Rose; secretary, Mrs. Agnes Pinkerton; treasurer, Mrs. Kathryn G. Graef; directors, Helen Fenton, Agnes Thais, Chester A. Washburn, Elizabeth Wetherill.

New York: Buffalo.—DISTRICT 1 held a regular meeting at the Y. W. C. A. on April 19. Dr. Frances Hollingshead spoke on The Buffalo Foundation. THE WESTERN NEW YORK STATE LEAGUE OF NURSING EDUCATION held a regular meeting in the Nurses' Home of the Children's Hospital May 9. Preceding the business meeting a number of interesting demonstrations of nursing procedures for the treatment of children were well presented by students of the hospital. Dr. H. R. Gaylord, who is in charge of the Gratwick Laboratory, the State Institute for the Treatment of Malignant Disease, gave an illustrated talk on the treatment of cancer, which was very instructive. Pamelia M. Doty, inspector of schools of nursing in Western New York, was also present, and told something of the institute that the Hudson Valley League is planning to hold in June. A short business meeting followed. The June meeting will be held at Niagara Falls. Clifton Springs.—On the afternoon of June 2nd about sixty members of District 2 were guests of the Clifton Springs nurses at the Sanitarium, at which time the regular meeting of the District Association was held. Following the business meeting, Miss Richardson, who is in charge of the Department of Occupational Therapy, gave a most interesting talk. This meeting was followed by a very beautiful supper, after which the guests were entertained at a play, entitled School Days, given by the Students' Dramatic Club. A most enjoyable time was reported by all present. Rochester.—COMMUNITY COMMENCEMENT EXERCISES were held in Convention Hall on May 18 for the classes of the Highland Hospital, Homeopathic Hospital and Rochester General Hospital. The address was given by Margaret Slattery of Boston. THE ROCHESTER GENERAL ALUMNAE ASSOCIATION gave a dinner to the graduating class on the evening of May 20. THE PRELIMINARY CLASS of the Rochester General Hospital, numbering twenty-two students, made a visit to the offices of the *American Journal of Nursing*, where the various procedures of the editorial and subscription offices were explained. They were then taken to the printer's to see the *Journal* going through the press. Auburn.—DISTRICT 4 held its regular quarterly meeting at Auburn City Hospital on April 13 with a large delegation from Syracuse and Cortland in attendance. Eight individual members were admitted. Gifts of $238.50 to the Nurses' Relief Fund were reported. The district voted that $100 be given for the Delano Memorial Fund. The members were delightfully entertained by the Auburn City Hospital Alumnae Association, including an unique singing and speaking programme by the Italian children from the Neighborhood House. The next regular meeting will be held in Cortland on June 8th. Oneida.—THE BROAD STREET HOSPITAL TRAINING SCHOOL FOR NURSES held graduating exercises for a class of seven on the evening of May 10 in the Baptist Church. The principal address was given by Dr. Augustus Downing of Albany, N. Y. Professor Lang-

worthy, Superintendent of Schools, also spoke. The Florence Nightingale pledge was administered by Rev. George B. Swinnerton. Dr. E. H. Carpenter presented the pins and diplomas. A reception at the nurses' home followed the exercises. Jessie Broadhurst has resigned her position as superintendent of the Broad Street Hospital and Training School after nearly nine years of service. She intends entering Teachers College in the fall. All regret her departure, as she has so ably filled her position. Saranac Lake.—DISTRICT 8 held its annual meeting with Mrs. A. W. Pearson on May 2. Officers elected are: President, Mary Olive Smith; vice-presidents, Hilda Jackson, Mrs. Helen Denny; secretary, Catherine McDonnell; treasurer, Mrs. Frances Freer; directors, Mercy C. Mullin, Mrs. Ethel O. Nickerson. Albany.—DISTRICT 9,—THE HUDSON VALLEY LEAGUE OF NURSING EDUCATION is to hold an institute in Albany June 5-8. (Details will be found on another page.) New York.—THE ALUMNAE ASSOCIATION OF THE LENOX HILL HOSPITAL gave a dance in January at the Vanderbilt Hotel for the benefit of the Pension Fund and another on May 20, on the Waldorf-Astoria roof, for the same purpose. THE BELLEVUE SOCIAL SERVICE DEPARTMENTS FOR THE ALLIED HOSPITALS held their annual meeting on the evening of April 18 in the form of a Dinner Conference at the Colony Club, at which Mary E. Wadley was the guest of honor. There were two hundred people present representing the Social Service Departments of Bellevue, Harlem, Fordham and Gouverneur Hospitals. The chief question discussed from various angles was, How Can the Social Service Bureau Be Made Valuable to the Medical Students?. THE PRESBYTERIAN HOSPITAL held commencement exercises for the 38 members of the class of 1922 in the Madison Avenue Presbyterian Church on the evening of May 11. A reception followed at Florence Nightingale Hall. Brooklyn.—THE LONG ISLAND COLLEGE HOSPITAL ALUMNAE ASSOCIATION has elected officers as follows: President, Mabel Phelps; vice-presidents, Jessie Wiley, Mary Caldwell; recording secretary, Josephine Walters; corresponding secretary, Helen Kenney; treasurer, Henriette Garrow; director for five years, Anna Burgess. THE ST. MARY ALUMNAE ASSOCIATION held its annual meeting on April 11 when officers were elected: President, Mrs. Edna Brenack; vice-president, Sara Clendenning; secretary, Helen M. Jamieson; treasurer, Christine McDonald. METHODIST EPISCOPAL HOSPITAL celebrated Commencement Week, beginning May 7 with the Baccalaureate sermon. On May 8 a class of 25 was graduated. On May 9 there was a reception by the Intermediate Class, which included a play and a dance. On May 10 the Alumnae Association entertained the class with a dance and a supper at Chateau Rembrandt, which was greatly enjoyed. Jamaica.—MARY IMMACULATE HOSPITAL celebrated Hospital Day May 12, as follows: The hospital kept open house on May 12 and also on Sunday, May 14. A Baby Show of babies born in the institution during the past two years was held. The nurses' home was open for inspection and high school students were especially invited.

North Dakota: THE NORTH DAKOTA STATE NURSES' ASSOCIATION held its tenth annual meeting in Fargo April 27-29 with the largest attendance in its history. Mary Margaret Muckley of Helena, Mont., gave a very helpful, inspiring addresses. Minnie H. Ahrens of the Central Division, Chicago, was at her best. The keynote of her address was Organization and Coöperation. A minimum requirement of two years' high school for entrance to training schools was endorsed by the association. The physicians of the Fargo Clinic staff were hosts at a reception for the convention members, the first evening of the sessions. On Saturday afternoon the St. John's and St. Luke's Alumnae Associations were joint hostesses at a tea. Among the resolutions passed was the following:

"Whereas, we, the nurses of North Dakota, feel a keen sense of gratitude to Dr. Richard Olding Beard for his recent article and chivalrous defense of our noble profession, which has been so misrepresented in recent articles in current magazines, and has so corrected impressions in said articles; Be it resolved that we, the members of North Dakota Association, express our gratitude to him for his defense of our organization and profession in its endeavour to live up to the heritage of our noble profession." The following officers were elected: President, Sarah Sand, Fargo; vice-presidents, Eveline M. Sewnson and Alma Opheim, Grand Forks; secretary-treasurer, Mrs. Winnifred Lund-Morris, Jamestown; corresponding secretary, Esther H. Teichmann, 720 Fifth Street South, Fargo; board of directors, Mildred Clark, Devils Lake; Edith B. Pierson, Minnewaukan; Ida Swanson, Bismarck; Virginia Rosenberger, Devils Lake.

Ohio: THE OHIO STATE ASSOCIATION OF GRADUATE NURSES AND THE STATE LEAGUE OF NURSING EDUCATION met at the annual convention at Dayton, May 24-26, inclusive, one of the most successful ever experienced in Ohio. All sessions were very well attended, the delegates numbering about three hundred sixty-three. Edna L. Foley of Chicago was the speaker of the evening at the closing session, the subject being The Work of the Public Health Nurse in Infantile Paralysis, After-care and Treatment. The success of the convention reflects much credit on the nurses of Dayton. Officers elected were: President, Grace E. Allison, Cleveland; first vice-president, Mary Jamieson, Columbus; secretary, Grace Bentley, 1299 Ethel Avenue, Lakewood; treasurer, Blanche Pfefferkorn, Cincinnati; directors, Anna Gladwin, Laura Logan. Cincinnati.—OHIO'S INSTITUTE FOR ADMINISTRATORS AND INSTRUCTORS will be held at the Cincinnati General Hospital June 13-19. Nineteen members of the graduating class of the Cincinnati General Hospital visited the pharmaceutical laboratories of the William S. Merrell Company and were shown pharmaceutical operations on a large scale. Akron.—DISTRICT 1 met on April 8 in the Medical Library and Visiting Nurse rooms. Interesting letters were read from Miss George, now serving in Riga, Russia, under the Red Cross. It was decided to organise three sections. The president appointed as chairmen of the organizing committees Mary Nursere of Canton for the Private Duty Section; Miss MacDonald of Akron for the Public Health Section; Clara F. Brouse of Akron for the League of Nursing Education Section. Miss Brouse made a special plea for more nurses to enroll in the Red Cross Nursing Service so that the service would be prepared for any emergency. A report was made of the progress of the several committees of the Jane A. Delano Memorial Fund. Miss VanDer Water told of the plans made for an Easter sale of fancy work and baked goods to be held on Easter Saturday in the Visiting Nurse rooms for the purpose of raising money for this fund. The Akron committee reported a dance which netted $50 for the fund and a card party which netted very nearly that sum and other plans which are under way for raising money. An interesting paper, Hobbies, was read by Miss Van Der Water. A delicious lunch was served by the entertainment committee. The Easter sale and bazaar was well patronized. The rooms were nicely decorated, booths were arranged where fancy work, home-baked goods, etc., were for sale, and a booth presided over by nurses in uniform where recruits for the Red Cross Nursing Service and for student work in the various schools might register. The Ladies' Auxiliary of Aultman and of Mercy Hospitals served tea and cakes throughout the afternoon and evening. A net sum of $420 was realized from this sale, to which was added $50 from Aultman

Hospital nurses and $30 from Canton Graduate Nurses' Association, making a total of $500 from the Canton committee for the Jane A. Delano Memorial Fund.

Oregon: THE OREGON STATE GRADUATE NURSES' ASSOCIATION will hold its annual meeting in Portland June 23. Oregon nurses will establish headquarters in Portland for delegates passing through the city to or from Seattle. Florence Voris of Indiana has taken up county nursing in Coos County. A series of county health institutes, including clinics, lectures and conferences, were held in four counties near Portland during May. Mary Carrothers, who has been county nursing for five months, has returned to her home in West Virginia. Portland.—Portland women who saw overseas service during the war have organized a branch of the American Women's Overseas League; this includes a large number of nurses. Martha Randall has been appointed superintendent *pro tem* of the Women's Protective Division of the Police Department. Miss Randall spent twelve months in overseas service during the war. Graduates of the Multnomah County Hospital Training School have organized an alumnae association and have affiliated with the state association. Eugene.—THE NURSES OF LANE COUNTY have organized District 5 of the State Association.

Pennsylvania: Philadelphia.—THE LANKENAU HOSPITAL held graduating exercises for the twenty members of the class of 1922 on April 18 in the Lankenau School for Girls. The address was given by Robert LeConte, M.D.; diplomas were awarded by Horace E. Smith, after which the members of the class recited the Nightingale pledge. A reception followd in the hospital. ST. AGNES HOSPITAL ALUMNAE ASSOCIATION entertained the graduates recently, Dr. John McGlenn gave a most interesting talk. HELEN FAIRCHILD POST met on May 9 at the Methodist Hospital. Ella Tomlinson was presented with a Past Commander's badge. The sum of $100 was presented to the Jane A. Delano Memorial Fund. The members voted to request both the American Legion and the American Nurses' Association to meet in Philadelphia in 1926, sesquicentennial year. The Post held services on Memorial Day at the Helen Fairchild Memorial Tree on the Pennsylvania Hospital grounds. The June meeting is to be held on the 13th, a box picnic at Bryn Mawr. Pittsburgh.—JESSIE TURNBULL, superintendent of Magee Hospital, was chairman of the Mary Budd Turpin Memorial meeting, held by the nurses of the Sixth District of Pennsylvania. This meeting was held in form of a banquet and 1,000 nurses were present. Mary C. Wheeler, Superintendent of Nurses of the Illinois Training School, Chicago, was the main speaker of the evening, her topic being Clearly Defined Ideals. The Mary Budd Turpin Fund is the gift of the Twentieth Century Club and the interest is to be used for educational purposes each year. Mary Budd Turpin gave up her life nursing the stricken during the influenza epidemic, 1918. The meeting was a pleasant get-to-gether one and everyone benefited by Miss Wheeler's address. Miss Wheeler also spoke at a special meeting of the Pittsburgh League of Nursing Education on Central Teaching Schools. MERCY HOSPITAL held commencement exercises for the School of Nursing on April 24 in Soldiers' Memorial Hall. Addresses were given by W. W. Maclachlan, M.D., John G. Bowman and Rt. Rev. Hugh Boyle. There were forty-five graduates. THE ALLEGHENY GENERAL HOSPITAL held commencement exercises for a class of thirty-one on the evening of May 16 at the First United Presbyterian Church. The address was given by John C. Acheson, President of the Pennsylvania College for Women; diplomas were presented by Dr. Maitland Alexander; and the pins by Lottie A. Darling. A reception followed the exercises at the nurses' home. THE ALLEGHENY GENERAL ALUMNAE ASSOCIATION recently elected officers for 1922, as follows: President,

Emma Scheideman; vice-president, Marie Hanlin; recording secretary, Gertrude McCullough Parker; corresponding secretary, Elizabeth J. Renner; treasurer, Jessie R. Gibson; directors, Mary McHenry, Ella M. Scheidy, Nelle Quinn, Isabel Chayter Flynn. At the regular meeting held on May 1, Dr. H. J. Benz of the Department of Public Health gave a most interesting lecture on The Schick Test. Braddock.—The Braddock General Hospital Alumnae Association entertained the class of 1922 at luncheon at the William Penn Hotel, Pittsburgh, on April 27, a theatre party following. Officers for the year are: President, Amy Linsenmayer; vice-president, Sara Harvey; secretary, Mrs. Mary Turner; treasurer, Lucy Spraggon. Chairmen of committees are: Membership, Mrs. Mae Moore; Social, Roxanna Gray; Auditing, Mrs. Winnie Spahn; Visiting, Sara Harvey. Erie.—District No. 7 (formerly No. 8) held its annual meeting January 18 in the Hamot Hospital Nurses' Home. Forty nurses were present and nine hospitals represented. Annual reports were read by the secretary and treasurer and the following officers were elected: President, Mrs. Amy MacLaren; vice-presidents, Lillian Swanson and Ethelyn Secord; secretary, Susan McFeeley; treasurer, Mrs. Mary Foringer. Four directors were elected and chairmen of the various committees were appointed. On March 16th a quarterly meeting of the District was held in the Nurses' Home of the Warren General Hospital, Warren, with 49 nurses present and seven hospitals represented. At this meeting the preferential ballot for state officers was completed. A Public Health Section was organized at this meeting and will meet each quarterly meeting. Caroline Borquin, D.H., of Warren, Pa., read a paper under the title, Mouth Manifestations of a Deviation from the Normal. After the meeting a delicious luncheon was served by the Alumnae of the Warren General Hospital. Scranton.—Hahnemann Hospital held graduating exercises for a class of seven at the Century Club on the evening of May 25. A reception followed. Reading.—The Reading Hospital held its twenty-second commencement exercises at the Orpheum Theatre on April 27 for a class of twenty-one. The address was given by Dr. Robert L. Dickinson of New York. Dr. R. M. Alexander presented the medal, class of 1921. Marie S. Frey presented the gift of the class to the training school. Announcement was made of the Alumnae Memorial Scholarship. A service flag for the nurses' home was presented by Mrs. George K. Levan, president of the Alumnae Association. Elizabeth Gallery, superintendent, presented the hospital badge, class of 1923. The diplomas were presented by Frank Livingood. A reception followed in Masonic Hall. The Reading Hospital Alumnae Association gave a farewell dinner on April 25th at Iris Hall in honor of Elizabeth Gallery, the retiring superintendent. At the same time they entertained the graduating class. Besides Miss Gallery and the class there were present thirty-two members of the Alumnae. The Association presented Miss Gallery with a string of pearls in appreciation of her loyalty to all members of the Alumnae Association, the class also presented a beautiful gift. After dinner dancing was enjoyed.

Rhode Island: Providence.—The Rhode Island League of Nursing Education met at the Providence Lying-In Hospital April 5. Plans were made for publicity work among high school girls. The Rhode Island Hospital Nurses' Alumnae met at the nurses' home on March 28. After the business meeting the members remained to play whist to help raise money for the hospital; a substantial sum being realized. Friends of the Rhode Island Hospital are arranging for a Block Party to be called "The Block-Aid," to be held June 2 and 3, to raise money to meet the deficit for the hospital. Many plans are being made and several entertainments have already been given toward this end. The nurses

have been given the Health and Beauty Booth. To raise money to start work, a peanut sale was held on April 8th; nurses and their friends, assisted loyally by the Boy Scouts, sold peanuts from carts on the street; over a thousand dollars was cleared. The Health and Beauty Committee are taking orders for dolls, dressed in all the various nurse uniforms used; they are very attractively dressed and it is hoped that this will prove an interesting and profitable feature of the sale. The Boy Scouts have given radio concerts for the patients at the Rhode Island Hospital; the boys wired the building and have done all the preparatory work. The patients are much pleased with the concerts. The Rhode Island Hospital Nurses' Club met at the Nurses' Home on April 4. Adelaide Patterson of the faculty of the Rhode Island College of Education spoke on Voice Culture and gave selected readings.

South Carolina: THE GRADUATE NURSES' ASSOCIATION OF SOUTH CAROLINA held its annual meeting in Greenville April 24. The meeting was well attended. At the opening of the business session a telegram was read from the secretary of the South Carolina Medical Association requesting that the nurses meet with them in a joint meeting at Charleston on the occasion of the 75th anniversary of the South Carolina Medical College. Encouraging reports were heard from the districts. Addresses were made by Miss C. Crews and Colonel Dedman of the U. S. Public Health Hospital, Greenville. Jane Van De Vrede made an inspiring address on Nursing, a Forecast and a Retrospect. One of the sessions was turned over to the separate meetings of the various sections of the Association. The Private Duty Section, Heads of Institutions Section, and the Public Health Section. A chairman, Sallie Gossett, of Laurens, was elected for the Public Health Section and a secretary, Teresa Leightsey of Newberry. A day was set aside as Jane A. Delano Day, June 7, in this state. One of the features of the meeting was the Public Health playlet given by the County Nurse, Lydia Spoeneman, as an entertainment after the banquet given by the Fifth District to the Association. The Association was delightfully entertained by the Chamber of Commerce and the Y. W. C. A. The following officers were elected for the coming year: President, Frances Bulow, Charleston; vice-presidents, Mary Gulledge and Laura Blackburn, Columbia; secretary, Annie Meyers, Mercy Hospital, Charleston; treasurer, Mrs. B. M. Sigmon, Chester; councillors, Lila Davis of Sumter and Elizabeth Clinkscales of Abbeville.

Texas: THE STATE NURSES' ASSOCIATION will hold its annual meeting in Fort Worth, June 19-21. Galveston.—THE MEDICAL DEPARTMENT OF UNIVERSITY OF TEXAS held commencement exercises on May 31, at the Grand Opera House. The first annual banquet given by the alumnae of the School of Nursing of the University of Texas for the graduating class was given just before the commencement exercises on the evening of May 31, at the Hotel Galvez. Mrs. Alice Wolf, who has been supervisor of the Children's Hospital, John Sealy Hospital, has resigned. Xelina D. Faulkner, class of 1921, is now supervisor of the Administration Building. Sophronia W. Rudnick is at St. Mary's Hospital as anaesthetist, after spending a year at the Postgraduate Hospital, New York.

Utah: Salt Lake City.—THE HOLY CROSS ALUMNAE ASSOCIATION is issuing a *Bulletin* with the hope of bringing graduates of the school more closely together.

Virginia: THE VIRGINIA STATE BOARD OF EXAMINERS OF NURSES will hold its semi-annual examination in Richmond, June 14, 15 and 16. For further information write Ethel Smith, Secretary-Treasurer, Craigsville, Va.

West Virginia: DISTRICT No. 2 of the West Virginia State Nurses' Association held its quarterly meeting in the Chamber of Commerce, Bluefield, April

15. A small, but very enthusiastic crowd was greeted by a most pleasing welcome address by Mrs. Imogene Davis of Bluefield. She was followed by Lola Sharpless, Chairman of District No. 2, who opened the meeting, and, in her interesting way, announced that Mrs. Susan Cook, State Chairman, was unable to attend the meeting, and had requested her to suggest that the quarterly meeting in July be postponed on account of the extreme heat. This was approved. An instructive paper entitled The Training School and the Teacher was read by Vesta Reid, Superintendent of the Gutherie Hospital, Huntington. This paper was well written and beautifully read, and the suggestion to use more discrimination in selecting probationers evinced a desire to raise the standard of the profession. This was followed by a very well prepared paper, The Training School and the Pupil Nurse, read by Mrs. Nellie Noll, Superintendent of the Princeton General Hospital, of Princeton. The most interesting feature of the meeting was an address by Dr. Session, of Princeton, who told of his wonderful and exciting experiences while with the American Red Cross during the World War. His lecture was illustrated by pictures taken while he was on duty in Siberia. Nellie Nash, of Princeton, gave a pleasing address on her work in the Public Health Department. Then followed a lengthy but very interesting paper entitled Leaves from the Life of a Shut-In, by Mary E. Reid, of Charleston. Owing to the absence of Miss Reid, this paper was read by the secretary, Miss McGee. It was thoroughly enjoyed, full of encouragement and valuable information. Mrs. Noel's invitation to hold the next meeting at Princeton in October was joyfully accepted. The meeting then adjourned, to accept the hearty invitation of Agnes Lynch, of St. Luke's Hospital, for a motor trip about Bluefield.

Wisconsin: THE BUREAU OF NURSING EDUCATION will conduct an examination in Milwaukee and Eau Claire, June 13, 14 and 15. Adda Eldredge, Secretary, Bureau of Education, State Board of Health, Madison. Fond du Lac.—THE SIXTH DISTRICT NURSES' ASSOCIATION held a meeting May 3. A luncheon was served and Mrs. E. P. Bickle of Oshkosh gave a talk on Child Welfare Work. Dr. F. F. Bowman, State Board of Health, talked on Communicable Diseases. The annual reports were received at this meeting: Grace De Voe, president; Elsie Bohlman, vice-president; Clara Galloway, secretary; Alice J. Walker, treasurer. Eau Claire.—THE TENTH DISTRICT NURSES' ASSOCIATION held its meeting April 11, at Mount Washington Sanatorium. $25 was donated towards movies for the entertainment of patients at the sanatorium. There are two hospitals in Eau Claire and the nurses are working for registry boards for both hospitals. The nurses will give a movie and a certain percentage of the money raised will go towards this fund. Dr. A. A. Pleyte, from the Wisconsin Anti-Tuberculosis Association, gave a very interesting talk on Tuberculosis Clinic Work. Luncheon was served by the staff of the sanatorium. A PUBLIC HEALTH NURSES' CONFERENCE of Milwaukee County Public Health Nurses was held at the Milwaukee County Dispensary March 30. Jeanette Hays, chairman. About twenty-five nurses were present. Many questions of interest to Public Health Nurses were discussed. A luncheon was served by the staff nurses of the dispensary. A district conference of Public Health Nurses was held in Green Bay, April 6, under the leadership of Theta Mead, Supervising Nurse of the State Board of Health, eighteen nurses being present. A similar meeting was held at Eau Claire April 20, sixteen nurses being present. A luncheon was served by the local nurses which was much enjoyed by all. On April 20, ten nurses graduated from the Wisconsin Anti-Tuberculosis Association's Health Service Training School. On May 1, the 18th class of Public Health Nurses began their four

months' course with an enrollment of fifteen. Mrs. Johanna Clark has accepted the position of field nurse on the Child Welfare Truck of the Wisconsin State Board of Health. Mary Regan has been appointed County Nurse in La Crosse County. Hulda Andreas, a graduate of the La Crosse Hospital, was appointed city nurse for the City of Janesville, in February. Sophie Paulus has been appointed County Nurse of Crawford County. Barbara Fletcher, Rock Island, Ill., has been appointed by Grant County as County Nurse. Helen Kelly, Supervising Nurse, Milwaukee County Dispensary, resigned May 1. Nelly Van Kooy, Supervising Nurse of the State Board of Health, has resigned and has accepted a position with the Wisconsin Anti-Tuberculosis Association, Milwaukee. Elkhorn. Mrs. Bayard Lyon, of Tientsin, China, formerly Elsie Chung, a trained nurse, is visiting in this city and has given interesting talks on China.

Wyoming: The Wyoming State Board of Nurse Examiners will hold examinations in Cheyenne, July 12 and 13. All applications are to be filed with the secretary prior to that date. Mrs. H. C. Olsen, 605 East 21st Street, Cheyenne. The Wyoming State Nurses' Association will hold its annual meeting in Cheyenne, July 11 and 12.

BIRTHS

(To be acceptable for publication, Birth and Marriage notices must be dated and must be sent within four months of their occurrence. Death notices of any date, or without date, are given space. All proper names should be written very plainly or printed.—Editors.)

To Mrs. W. Henry (Marjory Aldrich, class of 1918, Mountainside Hospital, Montclair, N. J.) a son, March 5.

To Mrs. George Williams (Flora Clever Barge, class of 1913, Lenox Hill Hospital, New York City) a daughter, Flora, May 11.

To Mrs. Don Kinder (Florence Baum, Braddock General Hospital, Braddock, Pa.) a son, Don, Jr., February 14.

To Mrs. Joseph H. Maurer (Anna C. Braun, class of 1916, Lenox Hill Hospital, New York City) a son, Joseph H. Jr., May 9.

To Mrs. Harley A. Chase (Margaret Donohue, class of 1918, Moses Taylor Hospital, Scranton, Pa.) a daughter, April 21.

To Mrs. Lentern (Mary Virginia Frost, class of 1920, Allegheny General Hospital, Pittsburgh) a daughter, Helen Frost, March 30.

To Mrs. Hewyett (Elizabeth Happersett, class of 1915, Women's Hospital of Philadelphia) a daughter, Elizabeth, in March.

To Mrs. William Davies (Lulu Jenkins, Union Hospital, Terre Haute, Ind.) a son, May 6.

To Mrs. L. H. DeLong (Elizabeth Lemig, class of 1917, Lankenau Hospital, Philadelphia, Pa.) a daughter, Ruth Jean, April 19.

To Mrs. Frederick N. Morford (Blenda Lind, class of 1917, Hackley Hospital, Muskegon, Mich.) a daughter, Betty Jean, April 22.

To Mrs. Wm. Doer (Margaret Lerom, class of 1916, Allegheny General Hospital, Pittsburgh) a daughter, Nancy, April 5.

To Mrs. P. F. DeVane (Emma Lura, class of 1916, Mary Fletcher Hospital, Burlington, Vt.) a son, April 20.

To Mrs. Bernard Hertich (Mildred Maytrah, class of 1913, Women's Hospital of Philadelphia) a son, Junior, March 25.

To Mrs. J. T. Murdock (Ann Moriority, class of 1919, Mountainside Hospital, Montclair, N. J.) a daughter, March 18.

To Mrs. J. C. Tinsman (Elizabeth Oakley, class of 1918, Indianapolis City Hospital) a daughter, Betty, Jr., May 1.

To Mrs. Herbert Green (Laura Reichenbach, class of 1912, Lankenau Hospital, Philadelphia) a son, Herbert Spencer, April 9.

To Mrs. H. M. Todd (Anna Schauble, class of 1913, Lankenau Hospital, Philadelphia) a daughter, Wilma Ruth, March 24.

To Mrs. R. D. Thompson (Sara Sheeder, class of 1920, Allegheny General Hospital, Pittsburgh) a son, Rodney Dean, Jr., March 17.

To Mrs. J. Cohen (Rebecca Smollen, class of 1916, Lenox Hill Hospital, New York) a son, in April.

To Mrs. Walter Grawe (Theresa Stutzbach, class of 1918, Lankenau Hospital, Philadelphia) a daughter, April 17.

To Mrs. J. L. Linn (Bess Welty of Nebraska M. E. Hospital, Omaha) a son, Jack Bion, March 27.

To Mrs. Wm. Gracey (Abigail Zimmerman, class of 1903, Allegheny General Hospital, Pittsburgh) a son, William, March 24.

MARRIAGES

Margaret Rogers Attlch (class of 1918, Methodist Episcopal Hospital, Philadelphia) to John Finn Good, M.D., April 15.

Marie E. Barrett (St. Agnes Hospital, Philadelphia) to Joseph Baker, in February.

Bertha A. Bate (class of 1914, St. Timothy's Hospital, Roxborough, Philadelphia) to Hans C. Funch, M.D., March 15. At home, Roxborough.

Bertha Marie Boyle (graduate of Springfield, Massachusetts Hospital) to Thomas Francis McVeigh, April 26. At home, Fall River, Mass.

Bertha Boyles (class of 1916, Indianapolis City Hospital) to V. W. French, M.D., April 22. At home, Terre Haute, Ind.

Alice May Bunting (class of 1917, Broad Street Hospital, Oneida, N. Y.) to James Townsend, May 5.

Sarah Cockefair (class of 1920, Brooklyn Hospital, Brooklyn, N. Y.) to Albert P. Schlafke, April 25. At home, Lake Tupper, N. Y.

Esther Dane (class of 1918, Homeopathic Hospital, Buffalo, N. Y.) to George H. Richards, April 15. At home, Buffalo, N. Y.

Luella Davey (class of 1920, Methdist Episcopal Hospital, Brooklyn, N. Y.) to Robert Cromwell, April 27.

Alfrida Erickson (class of 1921, Lutheran Hospital, Moline, Ill.) to Carl Anderson, April 15.

Bertha Ewing (class of 1916, Allegheny General Hospital, Pittsburgh) to John M. Stahl, April 12. At home, Akron, Ohio.

Martha Flynn (St. Agnes Hospital, Philadelphia) to James McMonagle, M.D., in February.

Emma Belle Garrup (class of 1918, Connecticut Training School, New Haven, Conn.) to James McLay, April 28.

June Gentz (class of 1915, Allegheny General Hospital, Pittsburgh) to Roscoe Mack, April 10. At home, Derry, Pa.

Anna T. Johnson (class of 1915, Mercy Hospital, Springfield, Mass.) to R. L. Hargrave, M.D., January 14. At home, Wichita Falls, Texas.

M. Annabel Johnston (class of 1919, Women's Hospital of Philadelphia) to Henry G. Leiber, April 28. At home, Philadelphia.

Laura Jones (class of 1919, Allegheny General Hospital, Pittsburgh) to Earl Lorich, January 10. At home, Pittsburgh, Pa.

Lillian E. Kecker (class of 1915, Hackensack Hospital, Hackensack, N. J.) to Robert Owen Black, March 28. At home, Ridgefield Park, N. J.

Hilda McCargar (class of 1919, Wyoming General Hospital, Rock Springs, Wyoming) to Thomas Neil Johnson, March 15. At home, Myrtle Point, Oregon.

Helen Elizabeth Mainwaring (graduate of Clifton Springs Sanitarium, Clifton Springs, N. Y.) to Thomas W. Love, April 19.

Lillian Gertrude Morgan (class of 1921, Methodist Episcopal Hospital, Philadelphia) to Earl F. Hudson, April 11.

Margaret Mulholland (class of 1915, St. Mary's Hospital, Philadelphia) to Thomas F. Healey, April 17. At home, Philadelphia.

Martha Olson (class of 1921, Lutheran Hospital, Moline, Ill.) to E. W. Nelson, March 16. At home, Rock Island, Ill.

Katharine Margaret Pippert (class of 1917, Columbia Hospital, Wilkinsburg, Pa.) to Christian Weber, March 18. At home, Los Angeles, Calif.

Nellie Crawford Read (class of 1919, Clifton Springs Sanitarium, Clifton Springs, N. Y.) to William Campbell English, April 15.

Annie H. Roberts (class of 1917, Methodist Episcopal Hospital, Brooklyn, N. Y.) to Meiron Jones, March 26. At home, Brooklyn, N. Y.

J. Wahneta Sprague (class of 1913, Protestant Episcopal Hospital, Philadelphia) to Mack Melvin Loyd, April 5. At home, Burlington, Colo.

C. Blanche Stevens (class of 1918, Henry W. Bishop, 3rd, Memorial Training School, Pittsfield, Mass.) to Clyde Filkins, May 29. At home, Springfield, Mass.

Louise Dickson Stone (class of 1913, Hahnemann Hospital, Scranton, Pa.) to Robert D. Jones, April 19.

Ione Thorsen (class of 1921, St. Luke's Hospital, Cedar Rapids, Ia.) to Harry A. Strothers, May 3. At home, Cedar Rapids, Ia.

Luella M. West (class of 1922, Montgomery Memorial Hospital, Charleston, Ill.) to Harold Newman, April 3. At home, Charleston, Ill.

DEATHS

Mrs. Emma Perry Allen (class of 1877, Connecticut Training School, New Haven, Conn.) suddenly, at Cheshire, Conn., February 26.

Mary B. Brady (class of 1912, St. Vincent's Hospital, Bridgeport, Conn.) on April 17. Mrs. Brady was struck by a truck as she was returning from her duties as a visiting nurse. She died while being carried into the hospital from which she graduated. Miss Brady was a most efficient and valued public health nurse, having served with the Health Department of the city for four years before joining the Visiting Nurse Association. She had a wholesome outlook on life and was coöperative in her work with others. Her death is a great loss to the city and to her patients and friends. Delegations of nurses and doctors attended the services at St. Augustine's Church.

Mrs. Rogers (M. Belva Farnsworth, class of 1912, Metropolitan Hospital School of Nursing, New York City) at her home, North Lawrence, N. Y., on March 4. Mrs. Rogers died of spinal meningitis following influenza.

Mrs. James Sinclair (Mary Finnegan, class of 1897, Bridgeport Hospital, Bridgeport, Conn.) on May 2, following a serious operation.

Florence Mabel Hawkshurst (graduate of the Buckley Training School, New York Skin and Cancer Hospital) April 1. Miss Hawkshurst was a beloved member of her alumnae association.

Frances Helmer (class of 1911, Ft. Wayne Lutheran Hospital) died March 14, in Lakeside Hospital, Kendallville, Indiana, of botulism poisoning. Miss Helmer

was a high school graduate and a graduate of the Indiana State Normal College. She was an enrolled Red Cross nurse and a member of her Alumnae Association. At the time of her death, she was a head nurse in Lakeside Hospital. She was sick only two days. Granting her last wish, eight Alumnae members acted as pall bearers. Burial was at her home in South Milford, Indiana. Miss Helmer had devoted most of her time to private duty nursing. She was well liked by everyone and she will be greatly missed by the members of her alumnae association.

Marion Hogle (class of 1916, Grace Hospital, Conneaut, Ohio) at Las Vegas, N. M., on April 9, of tuberculosis. Miss Hogle enlisted as a Red Cross nurse and was sent to Fort Oglethorpe, Georgia. She was loved by all who knew her and is missed greatly by her many friends.

Mrs. M. E. Eddy (Mary Lawther, graduate of the Illinois Training School, Chicago) on March 3, in Los Angeles, Calif., where she had made her home for many years. Burial was at Dubuque, Iowa. Mrs. Eddy suffered an acute infection which caused great suffering. She was a fine woman with many warm friends.

Hattie Mack (class of 1915, Trinity Hospital, Milwaukee, Wis.) at Waldheim Sanitarium, March 27. Miss Mack was night supervisor at the Johnson Emergency Hospital, Milwaukee, for five years, but resigned one year ago on account of ill health. Her home was at Rio, Wisconsin. Burial was at De Forest.

Lillian Manchester (class of 1900, Newton Hospital, Newton, Mass.) on March 30, at Winnipeg, Manitoba, of heart trouble. Although Miss Manchester was an invalid for a great many years, her letters to her friends were always bright and cheerful and full of her interest in others. She was buried at her old home, Apohaqui, New Brunswick.

Mrs. Thomas E. Robinson (Bessie Schelly, class of 1902, Chester County Hospital, West Chester, Pa.) at her home in Philadelphia, February 5, after an illness of several months.

Leonore May Stahnaker (class of 1904, Moses Taylor Hospital, Scranton, Pa.) recently, in Alhambra, Calif., after a long illness.

Eugenia Walker (class of 1917, St. John's Hospital, Brooklyn, N. Y.) on May 9, at St. Luke's Hospital, Denver, Colo. Miss Walker was in France for two years.

Mrs. John C. Berry (Mary Walsh, class of 1913, St. Mary's Hospital, Philadelphia) suddenly, on April 27. Mrs. Berry did private nursing, social service work, until she enlisted for service in the World War. After her discharge from service, she did public health nursing in Harrisburg. She was one of the most loyal members of her alumnae association. She was loved by all who knew her, and hosts of friends mourn her loss.

Katherine G. Wharton (class of 1895, National Homeopathic Hospital, Washington, D. C.) died on April 9 at Washington. Burial was at Harrisburg, Pa.

Frances White (class of 1920, St. Vincent's Hospital, Indianapolis) on March 31, at the hospital. Miss White had done private nursing since graduation. Her ever cheerful disposition made her a favorite among her classmates. Her service to her patients was marked by the quality of thoroughness which makes for perfection.

BOOK REVIEWS

Obstetrical Nursing. A text-book on the Nursing Care of the Expectant Mother, the Woman in Labor, the Young Mother and Her Baby. By Carolyn Conant Van Blarcom, R.N. 582 pages and 196 illustrations. The Macmillan Company. Price, $3.

This book will be one of unusual value to nurses in the training schools, to public health nurses in various capacities, and especially to that large group of isolated rural nurses upon whose knowledge and resources the lives of mothers and babies so frequently depend.

To the superintendents of nurses, instructors, and head nurses in the training schools, this book should be a great aid in assisting them to adequately interpret to the student her responsibility toward the spiritual phase of this work.

The introduction and the final summary of the book will be of special value to the instructor, for in these chapters the author demonstrates her vision of the great possibilities for the conservation of the lives of mothers and babies, through pre-natal instruction, and adequate care during the puerperium and throughout the life of the infant.

The teaching value of the book is strong through the free use of illustrations, thereby helping to elucidate each chapter by having the nursing procedures visualized as they are presented; by means of the fine details in nursing technic, and the wide range of subject matter presented from every angle. The Anatomy and Physiology are particularly valuable to the student. Anatomical measurements are clearly described and illustrated, thus meeting a need felt by both teachers and students.

One is impressed by the fine kind of professional ethics existing between the medical and nursing professions, which is of the type that combines all that is true in the traditions of the past, and grasps the finest spirit of the present, this combination culminating in the best interests of the patient.

The chapter on the Mental Hygiene of Pregnancy is one of the strongest in the book and is one from which all readers will undoubtedly receive inspiration and help in problems of mental hygiene, not only as such problems are related to the patient, but in its application to their own personal needs.

The book commends itself to the reader, although the preface is lengthy and there is repetition of material and a great volume of detail embodied in its pages. We believe this criticism is offset by the high motives that must have actuated the writer in making this educational contribution to the nursing world.

The strong feature of the whole text is a sympathetic and intelligent understanding and treatment of the whole subject from the spiritual, mental and physical standpoint of the mother and child, from the time of conception through the infant's life. In reading the book, one is impelled to believe that the writer had a message for nurses on behalf of the world of mothers and babies, and that her motive in writing it was a compelling force to send the message. We believe the message will be received.

S. LILLIAN CLAYTON, R.N.,
Superintendent of Nurses, Philadelphia General Hospital.

PRINCIPLES AND PRACTICE OF NURSING. By Bertha Harmer, B.Sc. (Columbia), R.N. The Macmillan Company, New York. 676 pages. Price, $3.

To a graduate of "old T. C." this book appears as a friend, as its pages are bestrewn with expressions that bring memories of serious class-room hours and happy associations with instructors and fellow students. We hail it with joy, feeling that it paves the way to more intelligent nursing, to making the many hours of practical work of greater educational value to the young women concerned,—our student nurses.

The book is divided into two parts. Part one includes the introduction which admirably reveals the social significance of nursing and the need of careful nurture of the altruistic spirit and ideals which prompt young women to enter this field of service. Attention is given to the nurse as an educator in the preservation of health and prevention of disease, as well as to curative measures and alleviation of distress. The conception of the hospital as a social center in the community is expressed. Too much emphasis cannot be placed upon trained and intelligent observation as one of the most important factors in nursing, and we are glad the author has so ably treated this subject.

The book is one which should be placed in the hands of every student nurse for the inspiration which it affords and for the insight as to what constitutes good nursing that it unveils. To supervisors and head nurses it shows the need and meaning of efficient, constructive supervision, as the students spend many hours under the observation and guidance of those in charge of the wards.

The book is of *inestimable value* to instructors in schools of nursing. The strongest feature of the book, of great importance to the instructor, is the emphasis placed upon *the underlying principles* of each practical procedure, so necessary in keeping student nurses from becoming mechanical performers of meaningless acts. The

technical process involved in each demonstration receives due attention. It is of aid to teachers because of the arrangement of procedures in logical sequence, beginning with the simpler ones in general nursing and leading to those more intricate and specialized, the intelligent performance of which depends upon the theoretical work which is provided later in the course. The correlation of theory and practice, a difficult problem in nursing education, receives consideration in that the material is divided into treatments in medical diseases and those involved in surgical nursing. This fortunate arrangement may prove convenient in adjusting the practical instruction to the related theoretical work.

In a word, this book will be appreciated by all nurses engaged or interested in nursing as an art, not merely as an occupation.

CAROL L. MARTIN, B.S., R.N.,
Executive Secretary, Central Council for Nursing Education, Chicago, Ill.

ABDOMINAL PAIN. By Dr. Norbert Ortner of Vienna. Translated by William A. Brann, M.D., and Alfred P. Luger, M.D. Rebman, New York. 342 pages.

The author of "Abdominal Pain" out of a large and successful experience discusses his subject in great detail and in a manner designed to help the medical profession.

With careful exactness the diagnoses are placed before the reader, and should be of great value to the physician in his study and treatment of such cases.

While "Abdominal Pain" is valuable chiefly to the medical profession, it has value also for the nurse; although diagnoses are not in her province an acquaintance with Dr. Ortner's book would make keener her observation and thus increase the worth of her reports of symptoms to the doctor.

Professor Ortner's "Abdominal Pain" is a distinct contribution to medical science, and will repay the thoughtful perusal of nurse as well as doctor.

ARMY SCHOOL ALUMNAE JOURNAL

THE highly creditable first number of the Army School of Nursing *Alumnae Journal*, just issued, carries much interesting news of the widely scattered members of the Association. The classification of activities indicates that 90 members are in the Army Nurse Corps, that approximately equal numbers have chosen institutional and public health positions, that matrimony and private duty have each claimed a share, and that a few are already taking postgraduate courses.

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